Master Scenario Events List (MSEL) Package AND EXERCISE EVALUATION GUIDE

2013 ESF 8 FUNCTIONAL EXERCISE

Draft: March 12, 2013



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MASTER SCENARIO EVENTS LIST (MSEL) PACKAGE AND EXERCISE EVALUATION GUIDE

March 12, 2013

PREFACE

The purpose of the Master Scenario Events List (MSEL) and Exercise Evaluation Guide (EEG) Package is to provide central exercise control team members a complete edition of the MSEL. This document is not intended to be distributed in full to field controllers; rather, they should receive those portions for which they are responsible as handouts. This includes the summary listing as well as any detailed inject forms they will deliver to players. The Controller and Evaluator (C/E) Handbook should be consulted for more information on MSEL inject procedures. Core control team members, primarily located at a Control Cell, may use this document to track exercise play, manage Simulation Cell (SimCell) functions, and maintain situational awareness for the Exercise Director. Evaluators may also reference individual pieces of the document through teamwork with controllers.

Exercises are the culmination of training toward a higher level of preparedness. This document was produced with help, advice, and assistance from planning team members from various departments and agencies. As such, this document is tangible evidence of the public safety partnership in response to the specified hazard.

The information in this document is current at the date of publication and is subject to change as dictated by the Exercise Planning Team.

Important!

This MSEL Package is complementary to the Exercise Plan (ExPlan) and the C/E Handbook. Refer to the ExPlan and C/E Handbook for more extensive information about the exercise, including participating agencies, schedules, briefings, and the responsibilities of various participants.

This document also contains the information for the Exercise Evaluation Guide (EEG). Each scenario/inject is matched with an EEG component.

This document contains information about the events of the exercise and should be safeguarded from disclosure before and during the exercise. Only designated controllers should have access to this document.

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HANDLING INSTRUCTIONS

1. The title of this document is 2013 ESF 8 Exercise Master Scenario Events List (MSEL) and Exercise Evaluation Guide (EEG) Package.

- 2. Information gathered in this MSEL Package is designated as For Official Use Only (FOUO) and should be handled as sensitive information that is not to be disclosed. This document should be safeguarded, handled, transmitted, and stored in accordance with appropriate security directives. Reproduction of this document, in whole or in part, without prior approval from the Department of Health & Hospitals is prohibited.
- 3. At a minimum, the attached materials will be disseminated strictly on a need-to-know basis and, when unattended, will be stored in a locked container or area that offers sufficient protection against theft, compromise, inadvertent access, and unauthorized disclosure.
- 4. For more information about the exercise, please consult the following points of contact (POCs):

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EXERCISE OBJECTIVES

Overall Objectives

- Information Systems
 - Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials.
 - Assess the ability of the Data Cell to organize and obtain missing status data from facilities failing to report.
 - Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell
 - Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems.
 - Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation.
 - Assess the ability of Regional ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities at Aeromedical Marshaling Points and other venues.
 - Assess the ability of the Data Cell to communicate significant information on demand to the ESF 8 leadership, using the appropriate ESF 8 systems and tools.
 - Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to effectively execute their responsibilities.
- Mass Casualty/LERN Protocol Testing and Medical Surge
 - Assess LERN protocol and applicability for the potential mass casualty situation.
 - Assess the affected hospitals' ability to demonstrate surge capacity reporting.
- Patient Tracking and Medical Surge
 - Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for patient reception and status reporting during the exercise.

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• Emergency Operations

- Demonstrate the ability to activate, staff, and operate the GOHSEP State ESF 8
 EOC team
- o Demonstrate the ability to activate, staff and operate the ESF 8 Data Cell.
- Demonstrate the ability to activate, staff, and operate Aero-medical Marshaling Points in selected areas.

Communications

 Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems.

Volunteer Management

 Assess and demonstrate the ability for Region 7 hospitals to request volunteers from the ESF8 system and LAVA.

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MSEL (SUMMARY)

The summary of the MSEL follows. This is a high-level view of MSEL injects in chronological order.

Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action					
	Start Date: June 24, 2013									
1	10:00 AM	GOHSEP EOC Notification Message	Senior Controller	GOHSEP EOC Staff, Leadership, State CST	All persons targeted receive the notification and report to the EOC as requested.					
2	10:30 AM	Data Cell Notification Message	Senior Controller	Data Cell, State CST	All persons targeted receive the notification and report to the EOC as requested.					
3	10:45 AM	Facility Activation Message	Senior Controller	Healthcare Facilities, DRCs, State CST	All persons targeted receive the notification and report to the EOC as requested.					
			Start Da	te: June 25, 2013						
4	8:00 AM	Briefing Day 1	Senior Controller	All	All parties receive adequate information to conduct the exercise for Day 1.					
5	8:30 AM	Start Exercise Day 1	Senior Controller	All	Exercise starts on time.					
6	9:00 AM	Facility Reporting Requirements	Senior Controller	Leadership and Data Cell	 Leadership defines and agrees upon the facility reporting requirements for the exercise. The Data Cell is able to organize its operation to monitor reporting compliance. ESF 8 application managers are able to configure the appropriate ESF 8 systems to accurately monitor and report compliance. 					
7	9:30 AM	Notification to Facilities for Reporting Requirements	Senior Controller	Healthcare Facilities, DRCs, State CST	 ESF 8 application managers are able to configure and deploy accurate messaging to facilities. LERN staff, GOHSEP EOC staff, and Data Cell staff are able to accurately inform facilities requesting clarification. All persons targeted receive the notification and begin reporting as required. Facilities can accurately begin reporting in ESF 8 systems as required. LERN staff are able to adequately assist facilities reporting application access problems. 					

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
8	10:00 AM	Nursing homes begin to upload residents to EMSTAT	GOHSEP EOC Controller/Evaluator	Nursing Homes, Nursing Home DRCs, GOHSEP EOC staff	 Designated facilities are able to upload and/or enter resident information into EMSTAT. LERN staff, GOHSEP EOC staff, and Data Cell staff are able to accurately assist facilities requesting help in the upload process.
9	10:00 AM	Data Cell begins monitoring compliance	Data Cell Controller/Evaluator	Data Cell, GOHSEP EOC staff, DRCs, Healthcare Facilities	 Data cell managers are able to assess and allocate the workload in sufficient time to produce the first UCG Brief for Leadership. Data Cell staff are able to: Run the reports required to identify non-compliant facilities; Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested Process the workload in sufficient time to produce the first UCG Brief for Leadership. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. LERN staff are able to adequately assist facilities reporting application access problems.
10	10:15 AM	H-72 Hour Conference Call	Senior Controller	Leadership, DRCs	 Leadership is able to organize and conduct the H-72 hour conference call using the ESF 8 Messaging application. All persons targeted receive the notification and are able to join the conference call.

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
11	10:30 AM	Facilities begin reporting power outages	GOHSEP EOC Controller/Evaluator	Data Cell, GOHSEP EOC staff, DRCs, Healthcare Facilities	Facilities are able to accurately enter the information required to report a power outage in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Data Cell staff are able to: Run the reports required to identify noncompliant facilities; Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Accurately enter data on facilities' behalf when requested Process the workload in sufficient time to produce the first UCG Brief for Leadership. LERN staff are able to adequately assist facilities reporting application access problems.
12	11:00 AM	Hospitals begin upload of patients to ARR	GOHSEP EOC Controller/Evaluator	Evacuating Hospitals, SIP Hospitals, Hospital DRCs, GOHSEP EOC Staff, Leadership, Data Cell	 Facilities are able to accurately upload data into the ARR. LERN staff, GOHSEP EOC staff, and Hospital DRCs are able to Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. LERN staff are able to adequately assist facilities reporting application access problems.

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
13	11:30 AM	Facilities begin requesting fuel	GOHSEP EOC Controller/Evaluator	Data Cell, GOHSEP EOC staff, DRCs, Healthcare Facilities	 Facilities are able to accurately enter the information required to report a power outage in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Accurately handle the resource request according to ESF 8 protocols. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on power problems. Accurately assist facilities in contacting the GOHSEP EOC and/or DRC staff to request the resource. Leadership is able to use the ESF 8 analytic tools provided to gain accurate situational visibility on power problems. LERN staff are able to adequately assist facilities reporting application access problems.
14	11:30 AM	Facilities call to request assistance with data entry	GOHSEP EOC Controller/Evaluator	Data Cell, GOHSEP EOC staff, DRCs, Healthcare Facilities	GOHSEP EOC staff, LERN staff, and the DRCs are able to:

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
15	12:00 PM	AMP activation in Regions 3 and 9	AMP Controller/Evaluator	Hospital DRCs, GOHSEP EOC Staff, Leadership, Data Cell	AMP staff are able to: Articulate the protocols required for AMP activation Run the reports required to accurately use the ARR to plan for and manage transportation and track patients through the process. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately handle any resource requests according to ESF 8 protocols.
16	1:00 PM	Leadership requests briefing from Data Cell for 3pm UCG	Data Cell Controller/Evaluator	Leadership, Data Cell	 Leadership is able to articulate the briefing requirement if different than the default package. Data Cell is able to produce the required briefing package in sufficient time to brief Leadership before the UCG.
17	1:00 PM	Nursing home requests assistance evacuating	GOHSEP EOC Controller/Evaluator	Nursing Home X, GOHSEP EOC staff, Nursing Home DRC	 Facilities are able to accurately enter the information required to report evacuations in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Accurately handle the resource request according to ESF 8 protocols. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. Accurately assist facilities in contacting the GOHSEP EOC and/or DRC staff to request any resources. Leadership is able to use the ESF 8 analytic tools provided to gain accurate situational visibility on evacuations.

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
18	1:00 PM	Facilities request replacement generators	GOHSEP EOC Controller/Evaluator	Data Cell, GOHSEP EOC staff, DRCs, Healthcare Facilities	 Facilities are able to accurately enter the information required to report a generator problem in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Accurately handle the resource request according to ESF 8 protocols. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on generators. Accurately assist facilities in contacting the GOHSEP EOC and/or DRC staff to request the resource. Leadership is able to use the ESF 8 analytic tools provided to gain accurate situational visibility on power problems. LERN staff are able to adequately assist facilities reporting application access problems.
19	1:00 PM	Nursing homes report the start of evacuations	GOHSEP EOC Controller/Evaluator	Nursing Homes, GOHSEP EOC staff, Nursing Home DRCs	 Facilities are able to accurately enter the information required to report evacuations in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Accurately handle the resource request according to ESF 8 protocols. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. Accurately assist facilities in contacting the GOHSEP EOC and/or DRC staff to request any resources. Leadership is able to use the ESF 8 analytic tools provided to gain accurate situational visibility on evacuations.

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
20	1:00 PM	Mass Casualty incident begins in Region 6	Data Cell Controller/Evaluator	LERN Staff, Hospital DRCs, Mass Fatality DRCs, GOHSEP EOC staff	 The local designated Incident Commander (IC) is able to initiate the MCI and contact LERN. LERN staff are able to: Accurately receive the information from the IC and formulate a situation report. Accurately configure an event and subsequent notifications to the appropriate persons. Accurately determine reporting requirements by involved facilities in order to adequately plan the response. Efficiently interact with the IC and any necessary DRCs Lend assistance to any facilities requesting clarification and/or assistance in providing any additional data that may be required. GOHSEP EOC staff are able to: Receive and process the notifications from LERN and produce an accurate situation report for Leadership as necessary. Lend assistance to any facilities requesting clarification and/or assistance in providing any additional data that may be required. Data Cell staff are able to: Assist the GOHSEP EOC staff in producing a situation report for Leadership as requested Lend assistance to any facilities requesting clarification and/or assistance in providing any additional data that may be required. Produce any requested and/or value-added analytics to assist the IC, the DRCs, GOHSEP EOC staff, and/or Leadership in gaining maximum situational visibility.

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
21	2:00 PM	Mass Fatality group responds to 35 mass casualty deaths in Region 6	Data Cell Controller/Evaluator	LERN Staff, Hospital DRCs, Mass Fatality DRCs, GOHSEP EOC staff	 The local designated Incident Commander (IC) is able to contact LERN with the fatality information LERN staff are able to: Accurately receive the information from the IC and formulate a situation report. Accurately configure a subsequent notifications to the appropriate persons – including the Mass Fatality DRC network Efficiently interact with the IC and any necessary DRCs, including the Mass Fatality DRC network Mass Fatality DRC staff are able to: Receive the notifications from LERN and gain sufficient situational visibility. Organize the framework for a Concept of Operations to response to the incident. Provide any situational updates to LERN for distribution to other necessary targeted persons. Data Cell staff are able to: Assist LERN and the Mass Fatality DRCs in producing a situation report for Leadership as requested Produce any requested and/or value-added analytics to assist the IC, the DRCs, GOHSEP EOC staff, and/or Leadership in gaining maximum situational visibility.
22	2:30 PM	Hospitals complete patient uploads	GOHSEP EOC Controller/Evaluator	Evacuating Hospitals, Hospital DRCs, GOHSEP EOC Staff, Leadership, Data Cell	 Facilities are able to accurately upload data into the ARR. LERN staff, GOHSEP EOC staff, and Hospital DRCs are able to Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. LERN staff are able to adequately assist facilities reporting application access problems.
23	2:45 PM	Data Cell produces UCG Briefing	Data Cell Controller/Evaluator	Data Cell, Leadership, GOHSEP EOC Staff	Data Cell is able to produce the required briefing package in sufficient time to brief Leadership before the UCG.

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
24	3:00 PM	DRCs review patient data in ARR	AMP Controller/Evaluator	DRCs, GOHSEP EOC Staff, Data Cell, Evacuating Hospitals	 DRC staff are able to accurately review the data entered by hospitals in their region. GOHSEP EOC staff and Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations.
25	3:30 PM	State ESF 8 reviews patient data in ARR	GOHSEP EOC Controller/Evaluator	GOHSEP EOC Staff, Leadership, Evacuating Hospitals, Hospital DRCs	State ESF 8 staff and GOHSEP EOC staff are able to:
26	3:40 PM	State ESF 8 produces Form 1s for evacuating hospitals	GOHSEP EOC Controller/Evaluator	GOHSEP EOC Staff, Leadership, JPATS, TPMRC	State ESF 8 staff and GOHSEP EOC staff are able to:
27	4:00 PM	End Exercise Day 1	Senior Controller	All	Exercise ends on time.
			Start Da	te: June 26, 2013	
28	8:00 AM	Briefing Day 2	Senior Controller	All	All parties receive adequate information to conduct the exercise for Day 1.
29	8:15 AM	Start Exercise Day 2	Senior Controller	All	Exercise starts on time.
30	8:15 AM	Facilities call to request assistance with data entry	GOHSEP EOC Controller/Evaluator	Data Cell, GOHSEP EOC staff, DRCs, Healthcare Facilities	GOHSEP EOC staff, LERN staff, and the DRCs are able to:

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
31	8:15 AM	Facilities report power restorations and continuing outages	GOHSEP EOC Controller/Evaluator	Data Cell, GOHSEP EOC staff, DRCs, Healthcare Facilities	 Facilities are able to accurately enter the information required to report a power outage in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Data Cell staff are able to: Run the reports required to maintain situation visibility on power problems. Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested LERN staff are able to adequately assist facilities reporting application access problems.
32	8:15 AM	Region 7 DRC requests support from LAVA for additional hospital staff	Senior Controller	Region 7 hospital group, GOHSEP EOC staff, DRCs, CCP staff	 Regional staff are able to: Articulate a need for additional staffing and submit a request through appropriate channels Receive and manage volunteers according to LAVA protocols GOHSEP EOC staff are able to: Accurately handle the resource request according to ESF 8 protocols. CCP Staff are able to: Activate LAVA and submit a request to potential volunteers Provide the Region 7 hospital with information on potential volunteers Articulate the process necessary to request and receive volunteers

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
33	8:15 AM	State ESF 8 submits PMRs and receives manifests from JPATS	GOHSEP EOC Controller/Evaluator	GOHSEP EOC Staff, Leadership, JPATS, AMP Staff, Evacuating Hospitals, Hospital DRCs	State ESF 8 staff and GOHSEP EOC staff are able to: Run the reports required to produce the output required for the patient by AMR Accurately submit the output to JPATS Receive all subsequent manifests from AMR and accurately upload the manifests into the ARR. DRC staff are able to: Access the ARR and produce any needed reports to plan for patient movement and facility support. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations.
34	8:15 AM	State ESF 8 submits PMRs and receives manifests from TPMRC	GOHSEP EOC Controller/Evaluator	GOHSEP EOC Staff, Leadership, TPMRC, AMP Staff, Evacuating Hospitals, Hospital DRCs	State ESF 8 staff and GOHSEP EOC staff are able to: Run the reports required to produce the output required for the patient by TPMRC Accurately submit the output to TPMRC Receive all subsequent manifests from TPMRC and accurately upload the manifests into the ARR. DRC staff are able to: Access the ARR and produce any needed reports to plan for patient movement and facility support. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations.
35	9:00 AM	Leadership requests briefing from Data Cell for 11am UCG	Data Cell Controller/Evaluator	Data Cell, Leadership, GOHSEP EOC Staff	 Leadership is able to articulate the briefing requirement if different than the default package. Data Cell is able to produce the required briefing package in sufficient time to brief Leadership before the UCG.

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Event #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
36	10:00 AM	Simulated Patient Movement	GOHSEP EOC Controller/Evaluator	AMP Staff, Evacuating Hospitals, Hospital DRCs, GOHSEP EOC staff, JPATS, TPMRC	 AMP staff are able to: Run the reports required to accurately use the ARR to plan for and manage transportation and track patients through the process. State ESF 8 staff and GOHSEP EOC staff are able to: Run the reports required to accurately use the ARR to monitor patient evacuations. DRC staff are able to: Access the ARR and produce any needed reports to plan for patient movement and facility support. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations.
37	2:45 PM	Data Cell produces UCG Briefing	Data Cell Controller/Evaluator	Data Cell, Leadership, GOHSEP EOC Staff	Data Cell is able to produce the required briefing package in sufficient time to brief Leadership before the UCG.
38	10:30 AM	Leadership requests additional information after UCG	Data Cell Controller/Evaluator	Data Cell, Leadership, GOHSEP EOC Staff	 Leadership is able to articulate the requirements for the additional data. Data Cell staff are able to interpret the request into an action plan to obtain the information
39	10:45 AM	Data Cell produces report/data for Leadership	Data Cell Controller/Evaluator	Data Cell, Leadership, GOHSEP EOC Staff	Data Cell is able to produce the required reports to meet the demands of Leadership.
40	10:45 AM	JPATS begins to report patient movement and location	GOHSEP EOC Controller/Evaluator	AMP Staff, Evacuating Hospitals, Hospital DRCs, GOHSEP EOC staff, JPATS, TPMRC	 JPATS is able to accurately transmit patient movement data to the ARR. The ARR is able to accurately receive the JPATS data. State ESF 8 staff and GOHSEP EOC staff are able to: Run the reports required to accurately use the ARR to monitor patient evacuations. DRC staff are able to: Access the ARR and produce any needed reports to plan for patient movement and facility support. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. Participating facilities can use the ARR to see the progress of their patients as the evacuation proceeds.

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E	vent #	Event Time	Event Description	Responsible Controller	Recipients (Players)	Expected Outcome of Player Action
	41	12:00 PM	End Exercise Day 2	Senior Controller	All	Exercise ends on time.

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MSEL Inject #1/2/3: Notifications		EEG – EOC Management and Communications EOC Management 1.1, 3.2 Communications 1.2, 1.3, 1.4, 2.3, 2.4, 2.6	
EXPECTED EVENT TIME:	10:00 AM to 10:45 AM, Monday, June 24, 2013		
ACTUAL EVENT TIME:			
Communication			
Method:	 ESF 8 Portal, At Risk Registry, and EMMA (for ever ESF 8 Messaging Module (Business Email, Business 	t configuration) c Cell Text, Home Email, Personal Cell Text, Business Phone	
WHO DELIVERS:	Senior Controller		
RECIPIENTS:	 GOHSEP EOC Staff Data Cell Staff Participating Facilities, DRCs, LERN, State CST 		
Objectives:	Demonstrate the ability to activate, staffCommunications	nd maintain communications with and disseminate information to critical	
EVENT DESCRIPTION:	 All necessary staff and personnel are notified of the duty stations timely. 	e activation for the incident and receive sufficient information to report to their	
INJECT:	Senior Controller kicks off the incident creation an	d notification protocols	
EXPECTED ACTION:		State ESF 8 staff Create the incident in all ESF 8 systems Configure and deploy all required notifications through the Messaging module	
EXPECTED OUTCOME:	 Events are created in all systems. Notifications are created and executed. Notifications are received by targeted persons. Designated staff report to duty stations as instruct 	red.	
SECONDARY ACTION:	 If Senior Controller fails to configure incidents, notify the Exercise Director If Senior Controller fails to configure and initiate notifications, contact LERN and instruct LERN to contact Leadership, determine the activation requirements and targets, configure and execute the notifications. 		

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MSEL Inject #4: Briefing Day 1		EEG – EOC Management 1.2, 1.3, 2.1, 2.4
EXPECTED EVENT TIME:	8:00 AM, Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Meeting and conference call/webinar	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	All exercise participants	
OBJECTIVES:	Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems.	
EVENT DESCRIPTION:	Day 1 briefing with all players	
INJECT:	Senior Controller initiates meeting and conference call/webinar	
EXPECTED ACTION:	Briefing delivered	
EXPECTED OUTCOME:	All parties receive adequate information to conduct the exercise for Day 1.	
SECONDARY ACTION:	• None	

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MSEL Inject #5 : S	tart Exercise Day 1	EEG – EOC Management 1.3
EXPECTED EVENT TIME:	8:15 AM, Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Senior Controller starts after briefing	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	All exercise participants	
OBJECTIVES:	Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems.	
EVENT DESCRIPTION:	Exercise starts with first inject/scenario	
INJECT:	Senior Controller initiates after briefing	
EXPECTED ACTION:	• Inject #6 starts	
EXPECTED OUTCOME:	Exercise starts on time.	
SECONDARY ACTION:	None	

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MSEL Inject #6: Fa	acility Reporting Requirements	EEG – Communications 1.2	
EXPECTED EVENT TIME:	9:00 AM, Tuesday, June 25, 2013		
ACTUAL EVENT TIME:			
Communication			
METHOD:	Verbal communication, augmented by Email. Back	ups include telephone calls, cell calls, or in-person briefing	
WHO DELIVERS:	Senior Controller		
RECIPIENTS:	Leadership and representatives from the GOHSEP	EOC Staff (Association representatives and HSS staff)	
Objectives:	 Information Systems Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation. 		
EVENT DESCRIPTION:	Leadership is asked to reach a consensus on and a	ccurately articulate the mandatory reporting requirements for facilities.	
INJECT:	• The Senior Controller requests via the initial briefing that Leadership define the mandatory reporting requirements for all healthcare facilities. This verbal request will be followed up by an email to Leadership.		
Expected Action:	 Leadership is able to quickly reach consensus on the requirement and communicate the requirements accurately to all stakeholders. The communication must go to the following: GOHSEP EOC staff LERN Data Cell State ESF 8 Team 		
EXPECTED OUTCOME:	 Leadership is able to articulate the mandatory reporting requirements for facility status reporting during the exercise. Based on this information, the State ESF 8 team is able to complete the Messaging Plan for facility reporting. All operational units including the Data Cell, LERN and the DRCs are briefed prior to the notifications being deployed in the next inject. 		
SECONDARY ACTION:	 If Leadership cannot articulate the requirements, the Controller/Evaluator uses the pre-packaged Warning Order If Leadership does not communicate with all required parties, the Controller/Evaluator relays the information. 		

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MSEL Inject #7: N	otification to Facilities	EEG – Communications 1.2	
EXPECTED EVENT TIME:	9:30 AM, Tuesday, June 25, 2013		
ACTUAL EVENT TIME:			
Communication			
METHOD:	ESF 8 Messaging Module		
WHO DELIVERS:	Senior Controller (acting as State ESF 8 staff)		
RECIPIENTS:	Critical healthcare facilities, all DRCs, GOHSEP EOC	staff, Data Cell staff, State CST, State Core ESF 8 Team, LERN Staff	
Objectives:	stakeholders, including decision-making g Communications	 Information Systems Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation. Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical 	
EVENT DESCRIPTION:	9 11 1	ents from Leadership, the State ESF 8 team will quickly configure a messaging	
INJECT:	State ESF 8 Team receives the mandatory reporting	requirements.	
EXPECTED ACTION:	State ESF Team produces a written Messaging Plan	and executes the notifications through the Messaging Module.	
EXPECTED OUTCOME:	ESF 8 application managers are able to configure and deploy accurate messaging to facilities. LERN staff, GOHSEP EOC staff, and Data Cell staff are able to accurately inform facilities requesting clarification. All persons targeted receive the notification and begin reporting as required. Facilities can accurately begin reporting in ESF 8 systems as required. LERN staff are able to adequately assist facilities reporting application access problems.		
SECONDARY ACTION:	 If the State ESF 8 Team does not produce the Messaging Plan, the Controller/Evaluator uses the pre-packaged Messaging Plan. If the State ESF 8 Team does not configure and/or execute the notifications, the Controller/Evaluator relays the Messaging Plan to LERN and requests that LERN configure and/or execute the notification. 		

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MSEL Inject #8: N	ursing Homes begin to Upload Residents to EMSTAT 6.3	
EXPECTED EVENT TIME:	10:00 AM, Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	ESF 8 Messaging Module, pre-configured notification to participating facilities.	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	Participating Nursing Homes, Nursing Home DRCs, GOHSEP EOC staff, State CST, LERN, Data Cell	
Objectives:	 Information Systems Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to effectively execute their responsibilities. Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 	
EVENT DESCRIPTION:	Upon notification, participating nursing homes will begin uploading/entering resident data into EMSTAT. Other exercise players provide support to the participating facilities.	
INJECT:	 provide support to the participating facilities. State ESF 8 team executes notification to participating facilities. 	
EXPECTED ACTION:	Participating nursing homes respond by beginning data entry.	
EXPECTED OUTCOME:	Designated facilities are able to unload and/or enter resident information into EMSTAT	
SECONDARY ACTION:	If the State ESF 8 Team does not configure or execute the notifications, the Controller/Evaluator requests that LERN configure and/or execute the notification.	

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MSEL Inject #9 : D	Pata Cell begins monitoring compliance EEG – EOC Management 3.6	
EXPECTED EVENT TIME:	10:00 AM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Announcement at Data Cell location. Data Cell manager may initiate.	
WHO DELIVERS:	Senior Controller, if necessary. Data Cell manager may initiate.	
RECIPIENTS:	Data Cell staff	
Objectives:	 Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of the Data Cell to organize and obtain missing status data from facilities failing to report. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Emergency Operations Demonstrate the ability to activate, staff, and operate the GOHSEP State ESF 8 EOC team Demonstrate the ability to activate, staff and operate the ESF 8 Data Cell. 	
EVENT DESCRIPTION:	Data Cell manager briefs Data Cell staff and begins organizing to monitor compliance.	
INJECT:	Data Cell manager may initiate.	
EXPECTED ACTION:	 Data Cell organizes for compliance monitoring and begins acquiring data from ESF 8 systems. 	
Expected Outcome:	 Data cell managers are able to assess and allocate the workload in sufficient time to produce the first UCG Brief for Leadership. Data Cell staff are able to: Run the reports required to identify non-compliant facilities; Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested Process the workload in sufficient time to produce the first UCG Brief for Leadership. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. LERN staff are able to adequately assist facilities reporting application access problems. 	
SECONDARY ACTION:	Senior Controller briefs the Data Cell Managers about the expected action.	
JECUNDAKT ACION.	Semon Controller briefs the Data Cell Mariagers about the expected action.	

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MSEL Inject # 10:	H-72 Hour Conference Call EEG – Communication	ns 1.2
EXPECTED EVENT TIME:	10:15 AM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Telephone conference call, using the Messaging Module	
Who Delivers:	Senior Controller acting as the State ESF 8 Team	
RECIPIENTS:	Leadership and H-72 conference call participants	
Objectives:	 Information Systems Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation. Emergency Operations Demonstrate the ability to activate, staff, and operate Aero-medical Marshaling Points in selected areas. Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 	
EVENT DESCRIPTION:	Leadership will initiate a conference call with the H-72 Hour group to discuss AMP activation.	
INJECT:	The State ESF 8 Team (Senior Controller) will ask Leadership to start the conference call.	
EXPECTED ACTION:	A conference call notification is issued from the Messaging Module	
LAFECIED ACTION.	The H-72 Hour group conducts the call according to protocol.	
EXPECTED OUTCOME:	All parties are able to join the conference call	
EXILETED OUTCOME.	A decision is made to open the relevant AMP locations.	
SECONDARY ACTION:	If State ESF 8 team does make the request, the Controller makes the request of Leadership, using LERN to assist with the Notification.	

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MSEL Inject #11:	: Facilities begin reporting power outages	EEG: EOC Management 5.1	
EXPECTED EVENT TIME:	10:30 AM Tuesday, June 25, 2013		
ACTUAL EVENT TIME:	·		
Communication			
METHOD:	Notification to participating facilities via Messaging Module		
WHO DELIVERS:	State ESF 8 Team – Message will be pre-scheduled		
RECIPIENTS:	Participating facilities, DRCs, Data Cell staff, GOHSEP EOC team, and LERN s	taff	
Objectives;	 Assess the ability of all critical healthcare facilities to use the apprint information within the requirements published by State ESF 8 off Assess the ability of the respective associations to support data of Assess the ability of facilities to report significant events (such as evacuations in the appropriate ESF 8 systems. 	 Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to execute their 	
EVENT DESCRIPTION:	Participating facilities will use EMSTAT to report power outages and genera	tor use.	
INJECT:	Notification to participating facilities to begin reporting		
EXPECTED ACTION:	 Facilities enter power outage data in EMSTAT. GOHSEP EOC staff, LERN staff, and the Data Cell staff: View the status updates in EMSTAT. Assist participating facilities that request help entering data 		
EXPECTED OUTCOME:	 Data Cell staff produce reports and assemble a situation report for Leadership. Facilities are able to accurately enter the information required to report a power outage in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Data Cell staff are able to: Run the reports required to identify non-compliant facilities; Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested Process the workload in sufficient time to produce the first UCG Brief for Leadership. LERN staff are able to adequately assist facilities reporting application access problems. 		
 If the State ESF 8 Team does not initiate the inject notification, the Controller/Evaluator will contact LERN via telephone that LERN initiate the notification. If the Data Cell does not begin producing Situation Reports, make the request verbally to the Data Cell Manager. 			

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MSEL Inject #12 :	Hospitals begin upload of patients to ARR EEG – Medical Surge 6.3	
EXPECTED EVENT TIME:	11:00 AM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification to participating facilities via Messaging Module	
WHO DELIVERS:	State ESF 8 Team – Message will be pre-scheduled	
RECIPIENTS:	Participating facilities, DRCs, Data Cell staff, GOHSEP EOC team, and LERN staff	
Objectives:	 Information Systems Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to effectively execute their responsibilities. Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 	
EVENT DESCRIPTION:	• Upon notification, participating hospitals will begin uploading/entering resident data into the ARR. Other exercise players provide support to the participating facilities.	
INJECT:	State ESF 8 team executes notification to participating facilities.	
EXPECTED ACTION:	Participating hospitals respond by beginning data entry.	
EXPECTED OUTCOME:	 Facilities are able to accurately upload data into the ARR. LERN staff, GOHSEP EOC staff, and Hospital DRCs are able to Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. LERN staff are able to adequately assist facilities reporting application access problems. 	
SECONDARY ACTION:	 If the State ESF 8 Team does not configure or execute the notifications, the Controller/Evaluator requests that LERN configure and/or execute the notification. If participating hospitals do not begin to enter resident data, either the State ESF 8 team or the Controller/Evaluator requests that the GOHSEP EOC staff, the Hospital DRCs or the Data Cell call each participating facility and request that they begin. 	

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MSEL Inject # 13:	Facilities begin requesting fuel	EEG – EOC Management 5.1
EXPECTED EVENT TIME:	11:30 AM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification to participating facilities via Messaging	g Module
WHO DELIVERS:	State ESF 8 Team – Message will be pre-scheduled	
RECIPIENTS:	 Participating facilities, DRCs, Data Cell staff, GOHS 	EP EOC team, and LERN staff
Objectives:	 Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to execute their responsibilities. 	
EVENT DESCRIPTION:	 Participating facilities will use EMSTAT to report fuel status. Participating facilities will call their DRC and/or the GOHSEP EOC staff and request fuel 	
INJECT:	Notification to facilities to begin entering fuel status data and calling their DRC and/or the GOHSEP EOC for fuel.	
EXPECTED ACTION:	 Facilities enter data and call for assistance DRCs and the GOHSEP EOC field fuel requests from facilities and manage according to protocol, using appropriate ESF 8 systems. 	
EXPECTED OUTCOME:	 Facilities: Are able to accurately enter the information required to report fuel status in EMSTAT. Are able to contact their DRC and/or the GOHSEP EOC staff to request fuel GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Accurately handle the resource request according to ESF 8 protocols. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on power problems. Accurately assist facilities in contacting the GOHSEP EOC and/or DRC staff to request the resource. Leadership is able to use the ESF 8 analytic tools provided to gain accurate situational visibility on fuel status and requests. LERN staff are able to adequately assist facilities reporting application access problems. 	
SECONDARY ACTION:	that LERN initiate the notification.	notification, the Controller/Evaluator will contact LERN via telephone and request Reports, make the request verbally to the Data Cell Manager.

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MSEL Inject # 14:	Facilities call to request assistance with data entry	EEG – EOC Management 5.1
EXPECTED EVENT TIME:	11:30 AM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification to participating facilities via Messaging Module	
WHO DELIVERS:	State ESF 8 Team – Message will be pre-scheduled	
RECIPIENTS:	 Participating facilities, DRCs, Data Cell staff, GOHSEP EOC team, ar 	nd LERN staff
Objectives:	 Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to execute their responsibilities. 	
EVENT DESCRIPTION:	Participating facilities will call their DRC, the Data Cell, and/or the	GOHSEP EOC staff to request assistance.
INJECT:	 Notification to facilities to begin requesting assistance by calling their DRC, the Data Cell, and/or the GOHSEP EOC staff. 	
EXPECTED ACTION:	 Facilities call for assistance DRCs, the Data Cell, and the GOHSEP EOC field requests from facilities and are able to enter data and/or provide guidance to facilities. 	
EXPECTED OUTCOME:	 GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Data Cell staff are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested LERN staff are able to adequately assist facilities reporting application access problems. 	
SECONDARY ACTION:	If the State ESF 8 Team does not initiate the inject notification, the request that LERN initiate the notification.	e Controller/Evaluator will contact LERN via telephone and

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MSEL Inject #15:	AMP activation in Regions 3 and 9	EEG – Medical Surge 2.4, 6.3	
EXPECTED EVENT TIME:	12:00 PM Tuesday, June 25, 2013	2:00 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:			
Communication			
METHOD:	Notification to AMP ESF 8 leaders via Messaging me	odule.	
WHO DELIVERS:	Senior Controller		
RECIPIENTS:	 Region 3 and 9 AMP leaders, participating facilities 	, DRCs, Data Cell staff, GOHSEP EOC team, and LERN staff	
Objectives:	 Assess the ability of Regional ESF 8 teams Aeromedical Marshaling Points and other Assess the ability of AMP leadership staff Assess the ability of ESF 8 leadership to u AMR, HHS, and others involved in their N Patient Tracking and Medical Surge Assess the ability of hospitals, nursing ho 	Aeromedical Marshaling Points and other venues. Assess the ability of AMP leadership staff to articulate the protocols for activating their AMP site. Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with the State EOC team, AMR, HHS, and others involved in their MIEP protocols. Patient Tracking and Medical Surge	
EVENT DESCRIPTION:	 Region 3 and 9 AMP leaders will simulate the proto 		
INJECT:	 Notification to the Region 3 and 9 AMP leaders that 		
EXPECTED ACTION:	 AMP leaders walk through their protocols for activating and operating their AMP sites. AMP leaders use the appropriate ESF 8 systems to support any patient movement requests from their region. 		
EXPECTED OUTCOME:	 AMP staff are able to: Articulate the protocols required for AMP activation Run the reports required to accurately use the ARR to plan for and manage transportation and track patients through the process. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately handle any resource requests according to ESF 8 protocols. 		
SECONDARY ACTION:	If the State ESF 8 Team does not initiate the inject leaders via telephone and request that they begin to the state of the state o	notification, the Controller/Evaluator will contact the Region 3 and 9 AMP the activation of their respective sites.	

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MSEL Inject #16:	Leadership requests briefing from Data Cell for 3pm UCG	EEG – EOC Management 6.12
EXPECTED EVENT TIME:	1:00 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Verbal communication to Data Cell Liaison	
WHO DELIVERS:	Senior Controller suggests to Leadership	
RECIPIENTS:	Data Cell Liaison and Data Cell Manager	
OBJECTIVES:	 Information Systems Assess the ability of the Data Cell to communicate significant information on demand to the ESF 8 leadership, using the appropriate ESF 8 systems and tools. 	
EVENT DESCRIPTION:	Leadership requests the normal UCG briefing from the Data Cell	
INJECT:	Leadership makes a verbal request to the Data Cell Liaison.	
EXPECTED ACTION:	 Data Cell Liaison communicates the request to the Data Cell Manager, and the Data Cell produces the UCG brief according to protocol. 	
Ехрестед Оитсоме:	 Leadership is able to articulate the briefing requirement if different than the default package. Data Cell is able to produce the required briefing package in sufficient time to brief Leadership before the UCG. 	
SECONDARY ACTION:	• If Senior Controller does not communicate to Leadership, the Controller communicates the need for the UCG briefing to the Data Cell Manager.	

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MSEL Inject # 17:	Nursing home requests assistance evacuating EEG – EOC Management 5.1	
EXPECTED EVENT TIME:	1:00 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification to participating facilities via Messaging Module	
WHO DELIVERS:	State ESF 8 Team – Message will be pre-scheduled	
RECIPIENTS:	Participating facilities, DRCs, Data Cell staff, and GOHSEP EOC staff	
Objectives:	Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to execute their responsibilities.	
EVENT DESCRIPTION:	Participating facilities will use EMSTAT to report evacuation status. Participating facilities will call their DRC and/or the GOHSEP EOC staff and request assistance.	
INJECT:	Notification to facilities to begin entering fuel status data and calling their DRC and/or the GOHSEP EOC for fuel.	
EXPECTED ACTION:	Facilities enter data and call for assistance DRCs and the GOHSEP EOC field transportation requests from facilities and manage according to protocol, using appropriate ESF 8 systems. All parties simulate receipt of transportation assets	
EXPECTED OUTCOME:	 Facilities are able to accurately enter the information required to report evacuations in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Accurately handle the resource request according to ESF 8 protocols. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. Accurately assist facilities in contacting the GOHSEP EOC and/or DRC staff to request any resources. Leadership is able to use the ESF 8 analytic tools provided to gain accurate situational visibility on evacuations. 	
SECONDARY ACTION:	 If State ESF 8 Team fails to configure and/or execute the notification, the Controller contacts LERN and requests that LERN configure and/or execute the notification. If participating facilities do not respond to the notification, the Controller makes a verbal request to the GOHSEP EOC staff to contact participating facilities via telephone to initiate the process. 	

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MSEL Inject #18:	Facilities request replacement generators	EEG – EOC Management 5.1
EXPECTED EVENT TIME:	1:00 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification to participating facilities via Messaging Module	
WHO DELIVERS:	State ESF 8 Team – Message will be pre-scheduled	
RECIPIENTS:	Participating facilities, DRCs, Data Cell staff, GOHSEP EOC team, an	d LERN staff
Objectives:	 Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to execute their responsibilities. 	
EVENT DESCRIPTION:	 Participating facilities will use EMSTAT to report fuel, power and generator status. Participating facilities will call their DRC and/or the GOHSEP EOC staff and request assistance. Notification to facilities to begin entering power and generator status data and calling their DRC and/or the GOHSEP EOC for assistance. 	
EXPECTED ACTION:	 Facilities enter data and call for assistance DRCs and the GOHSEP EOC field fuel requests from facilities and manage according to protocol, using appropriate ESF 8 systems. 	
EXPECTED OUTCOME:	 Facilities are able to accurately enter the information required to report a generator problem in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Accurately handle the resource request according to ESF 8 protocols. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on generators. Accurately assist facilities in contacting the GOHSEP EOC and/or DRC staff to request the resource. Leadership is able to use the ESF 8 analytic tools provided to gain accurate situational visibility on power problems. LERN staff are able to adequately assist facilities reporting application access problems. 	
SECONDARY ACTION:	 If the State ESF 8 Team does not initiate the inject notification, the request that LERN initiate the notification. If the Data Cell does not begin producing Situation Reports, make to 	•

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MSEL Inject # 19:	Nursing homes report the start of evacuations EEG – Medical Surge 6.3	
EXPECTED EVENT TIME:	1:00 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification using the Messaging Module	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	All participating nursing homes, ARCPs, GOHSEP EOC staff, DRCs, and Data Cell staff	
Objectives:	 Information Systems Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation. Assess the ability of Regional ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities at Aeromedical Marshaling Points and other venues. Patient Tracking and Medical Surge Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for 	
EVENT DESCRIPTION:	 patient reception and status reporting during the exercise. The various players in nursing home/ARCP resident movement begin activities as follows: Facilities simulate placement on resident transport and arrival at destination locations. GOHSEP EOC staff and DRCs assist with data entry as requested. 	
INJECT:	The notification instructs the various players to follow their role assignments, including simulated resident transfers from originating facilities to destinations, etc.	
EXPECTED ACTION:	 GOHSEP EOC staff and DRCs communicate with evacuating facilities about resident movement. This is done through the EMSTAT and through telephone communications. Patient location data begins to stream in the various applications. 	
Ехрестед Оитсоме:	 Facilities are able to accurately enter the information required to report evacuations in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. Leadership is able to use the ESF 8 analytic tools provided to gain accurate situational visibility on evacuations. 	
SECONDARY ACTION:	If the Senior Controller does not initiate the inject notification, the Controller/Evaluator will contact LERN via telephone and request that LERN initiate the notification.	

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MSEL Inject #20 :	Mass Casualty incident begins in Region 6	EEG – Triage 1.2, 1.3, 1.4, 1.8, 2.1, 3.2, 5.3
EXPECTED EVENT TIME:	1:00 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification to participating Incident Commander (IC)	to initiate the MCI by contacting LERN via telephone.
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	Participating IC	
Objectives:	 Mass Casualty/LERN Protocol Testing and Medical Surge Assess LERN protocol and applicability for the potential mass casualty situation. Assess the affected hospitals' ability to demonstrate surge capacity reporting. Patient Tracking and Medical Surge Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for patient reception and status reporting during the exercise. Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 	
EVENT DESCRIPTION:		to the scenario and requests an MCI notification according to protocol.
INJECT:	The notification to the IC instructs the IC to report the	MCI to LERN.
EXPECTED ACTION:	Participating IC contacts LERN and LERN initiates the I	MCI protocol, including notifications.
EXPECTED OUTCOME:	 The local designated IC is able to initiate the MCI and contact LERN. LERN staff are able to: Accurately receive the information from the IC and formulate a situation report. Accurately configure an event and subsequent notifications to the appropriate persons. Accurately determine reporting requirements by involved facilities in order to adequately plan the response. Efficiently interact with the IC and any necessary DRCs Lend assistance to any facilities requesting clarification and/or assistance in providing any additional data that may be required. GOHSEP EOC staff are able to: Receive and process the notifications from LERN and produce an accurate situation report for Leadership as necessary. Lend assistance to any facilities requesting clarification and/or assistance in providing any additional data that may be required. Data Cell staff are able to: Assist the GOHSEP EOC staff in producing a situation report for Leadership as requested Lend assistance to any facilities requesting clarification and/or assistance in providing any additional data that may be required. Produce any requested and/or value-added analytics to assist the IC, the DRCs, GOHSEP EOC staff, and/or Leadership in gaining maximum situational visibility. 	
SECONDARY ACTION:	If the Senior Controller does not initiate the inject not LERN initiate the notification to the IC.	ification, the Controller/Evaluator will contact LERN via telephone and request that

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MSEL Inject #21 :	Mass Fatality group responds to 35 mass casualty deaths in Region 6 EEG – Mass Fatality All in Section 1		
EXPECTED EVENT TIME:	2:00 PM Tuesday, June 25, 2013		
ACTUAL EVENT TIME:			
Communication			
METHOD:	Notification to participating Incident Commander (IC) to update the MCI with mass fatality data by contacting LERN via telephone.		
WHO DELIVERS:	Senior Controller		
RECIPIENTS:	Participating IC		
Objectives:	 Mass Casualty/LERN Protocol Testing and Medical Surge Assess LERN protocol and applicability for the potential mass casualty situation. Assess the affected hospitals' ability to demonstrate surge capacity reporting. Patient Tracking and Medical Surge Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for patient reception and status reporting during the exercise. Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 		
EVENT DESCRIPTION:	The participating IC updates the MCI to LERN according to the scenario and requests that the State ESF 8 team be notified.		
INJECT:	The notification to the IC instructs the IC to report the mass fatality data and support request to LERN.		
Expected Action:	 Participating IC contacts LERN and LERN contacts the State ESF 8 team. The State ESF 8 begins the notification to the participating Mass Fatality team. The participating Mass Fatality team coordinates communication to develop a CONOPS and reports that CONOPS to LERN and the State ESF 8 team. 		
Expected Outcome:	 The local designated Incident Commander (IC) is able to contact LERN with the fatality information LERN staff are able to: Accurately receive the information from the IC and formulate a situation report. Accurately configure a subsequent notifications to the appropriate persons – including the Mass Fatality DRC network Efficiently interact with the IC and any necessary DRCs, including the Mass Fatality DRC network Mass Fatality DRC staff are able to: Receive the notifications from LERN and gain sufficient situational visibility. Organize the framework for a Concept of Operations to response to the incident. Provide any situational updates to LERN for distribution to other necessary targeted persons. Data Cell staff are able to: Assist LERN and the Mass Fatality DRCs in producing a situation report for Leadership as requested Produce any requested and/or value-added analytics to assist the IC, the DRCs, GOHSEP EOC staff, and/or Leadership in gaining maximum situational visibility. 		
SECONDARY ACTION:	If the Senior Controller does not initiate the inject notification, the Controller/Evaluator will contact LERN via telephone and request that LERN initiate the notification to the IC.		

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MSEL Inject #22 :	Hospitals complete patient uploads	EEG – Medical Surge 6.3
EXPECTED EVENT TIME:	2:30 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification using the Messaging Module	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	Participating hospitals, DRCs, GOHSEP EOC staff, and	d the Data Cell
Objectives:	 Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation. Assess the ability of Regional ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities at Aeromedical Marshaling Points and other venues. Patient Tracking and Medical Surge Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for patient reception and status reporting during the exercise. 	
EVENT DESCRIPTION:	 Hospitals are notified to complete all patient uploads to the ARR. DRCs, GOHSEP EOC staff, LERN staff and Data Cell staff assist with problems reported by facilities. 	
INJECT:	Notification informs all players that patients uploads are to be completed so that the Form 1s can be produced and transmitted to the patient regulating players (TPMRC and JPATS).	
EXPECTED ACTION:	Hospitals finish uploads and indicate that their patient lists are ready in the ARR.	
Ехрестед Оитсоме:	 Facilities are able to accurately upload data into the ARR. LERN staff, GOHSEP EOC staff, and Hospital DRCs are able to Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. LERN staff are able to adequately assist facilities reporting application access problems. 	
SECONDARY ACTION:	If the Senior Controller does not initiate the inject not request that LERN initiate the notification to the IC.	otification, the Controller/Evaluator will contact LERN via telephone and

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MSEL Inject #23 :	Data Cell produces UCG Briefing	EEG – EOC Management 6.12
EXPECTED EVENT TIME:	2:45 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Verbal communication to Leadership Group and E	ata Cell Liaison, or Notification to Data Cell from Messaging module
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	Leadership, Data Cell Liaison and Data Cell Manag	er
Objectives:	 Assess the ability of the Data Cell to organize and obtain missing status data from facilities failing to report. Assess the ability of the Data Cell to communicate significant information on demand to the ESF 8 leadership, using the appropriate ESF 8 systems and tools. 	
EVENT DESCRIPTION:	Leadership requests the standard briefing package along with any special data requests	
Inject:	• Senior Controller reminds Leadership and Data cell Liaison about the need for the UCG briefing. In the absence of this reminder, the Messaging module will send out a scheduled notification to the Data Cell.	
EXPECTED ACTION:	• Leadership articulates the need for the UCG briefing and any additional data, and the Data Cell Liaison communicates this need to the Data Cell Manager. The Data Cell Manager organizes staff to produce the brief.	
EXPECTED OUTCOME:	Data Cell is able to produce the required briefing package in sufficient time to brief Leadership before the UCG.	
SECONDARY ACTION:	• If the Data Cell cannot produce the brief in the time requested, the Data Cell Manager will take screenshots of the EMSTAT dashboards and summarize key indicators using EMSTAT and Tableau standard reports.	

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MSEL Inject #24:	DRCs review patient data in ARR EEG – Medical Surge 6.3	
EXPECTED EVENT TIME:	3:00 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification via the Messaging Module	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	Hospital DRCs, the GOHSEP EOC staff, and the Data Cell	
Objectives:	 Information Systems Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with facilities and other stakeholders, including decision-making groups for patient evacuation. Assess the ability of Regional ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities at Aeromedical Marshaling Points and other venues. Patient Tracking and Medical Surge Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for patient reception and status reporting during the exercise. 	
EVENT DESCRIPTION:	After the hospitals complete the patient uploads or after receipt of the notification, the DRCs review the patient data to ensure completeness and readiness for creation of Form 1.	
INJECT:	Notification instructs DRCs to ensure that patient data is ready for Form 1 creation.	
EXPECTED ACTION:	 DRCs indicate that patient data is ready in the ARR DRCs communicate with facilities to make corrections as needed. 	
EXPECTED OUTCOME:	 DRC staff are able to accurately review the data entered by hospitals in their region. GOHSEP EOC staff and Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. 	
SECONDARY ACTION:	 If the Senior Controller does not initiate the inject notification, the Controller/Evaluator will contact LERN via telephone and request that LERN initiate the notification to the IC. The Senior Controller, Controller and GOHSEP EOC staff will monitor the patient data in the ARR and assist DRCs and facilities as needed. 	

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MSEL Inject #25 :	State ESF 8 reviews patient data in ARR	EEG – Medical Surge 6.3
EXPECTED EVENT TIME:	3:30 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Senior Controller notifies the State ESF 8 team to be	gin reviewing patient data
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	State ESF 8 team, DRCs, and GOHSEP EOC team	
Objectives:	 Information Systems Assess the ability of State ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities Assess the ability of AMP leadership staff to produce appropriate Patient Movement Request files Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with AMR, HHS, and others involved in their MIEP protocols. Patient Tracking and Medical Surge Assess the ability of State ESF 8 teams to adequately support patient movement requests. 	
EVENT DESCRIPTION:	State ESF 8 teams review Patient Movement Reques	ts by facility
INJECT:	Senior Controller will verbally notify the State ESF 8 team.	
EXPECTED ACTION:	 State ESF 8 team reviews Patient Movement Requests by facility State ESF 8 team requests additional data and clarification from DRCs and hospitals as required. 	
EXPECTED OUTCOME:	 State ESF 8 staff and GOHSEP EOC staff are able to: Accurately use the ARR application to review the patient data submitted. Run the reports required to gain accurate situational visibility on evacuations. 	
SECONDARY ACTION:	If the Senior Controller does not verbally notify the Steam to begin the activity.	State ESF 8 team, Leadership Controller/Evaluator will notify the State ESF 8

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MSEL Inject 26: St	rate ESF 8 produces Form 1s for evacuating hospitals 6.3	
EXPECTED EVENT TIME:	3:40 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	• Senior Controller notifies the State ESF 8 team to begin producing Patient Movement Request files for transmission to DoD and/or HHS/AMR	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	State ESF 8 team, DRCs, and GOHSEP EOC team	
Objectives:	 Information Systems Assess the ability of State ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities Assess the ability of AMP leadership staff to produce appropriate Patient Movement Request files Assess the ability of DoD and HHS/AMR to receive and process the Patient Movement Requests Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with AMR, HHS, and others involved in their MIEP protocols. Patient Tracking and Medical Surge Assess the ability of State ESF 8 teams to adequately support patient movement requests. 	
EVENT DESCRIPTION:	State ESF 8 teams review Patient Movement Requests by facility and produce the files for transmission to DoD and HHS/AMR.	
INJECT:	Senior Controller will verbally notify the State ESF 8 team.	
EXPECTED ACTION:	 State ESF 8 team reviews Patient Movement Requests by facility State ESF 8 team produces the files and emails them to the appropriate contacts at DoD and HHS/AMR. 	
EXPECTED OUTCOME:	 State ESF 8 staff and GOHSEP EOC staff are able to: Run the reports required to produce the output required for the patient movement agency (TPMRC and/or AMR) Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. 	
SECONDARY ACTION:	• If the Senior Controller does not verbally notify the State ESF 8 team, Leadership Controller/Evaluator will notify the State ESF 8 team to begin the activity.	

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MSEL Inject #27:	End Exercise Day 1	EEG – EOC Management 1.3
EXPECTED EVENT TIME:	4:00 PM Tuesday, June 25, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification using Messaging Module	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	All exercise participants	
OBJECTIVES:	 Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 	
EVENT DESCRIPTION:	Notification advises that exercise play has ended for Day 1.	
INJECT:	Senior Controller initiates notification at designated end time.	
EXPECTED ACTION:	All parties receive notification and end exercise play.	
EXPECTED OUTCOME:	Exercise ends on time.	
SECONDARY ACTION:	If Senior Controller fails to configure and/or initial notifications.	re notification, contact LERN and instruct LERN to configure and execute the

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MSEL Inject #28:	Briefing Day 2	EEG – EOC Management 1.2, 1.3, 2.1, 2.4
EXPECTED EVENT TIME:	8:00 AM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Meeting and conference call/webinar	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	All exercise participants	
OBJECTIVES:	 Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 	
EVENT DESCRIPTION:	Day 1 briefing with all players	
INJECT:	Senior Controller initiates meeting and conference call/webinar	
EXPECTED ACTION:	Briefing delivered	
EXPECTED OUTCOME:	All parties receive adequate information to conduct the exercise for Day 1.	
SECONDARY ACTION:	• None	

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MSEL Inject #29:	Start Exercise Day 2	EEG – EOC Management 1.3
EXPECTED EVENT TIME:	8:15 AM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Senior Controller starts after briefing	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	All exercise participants	
OBJECTIVES:	 Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 	
EVENT DESCRIPTION:	Exercise start with first inject/scenario	
INJECT:	Senior Controller initiates after briefing	
EXPECTED ACTION:	Inject #31 starts	
EXPECTED OUTCOME:	• Exercise starts on time.	
SECONDARY ACTION:	• None	

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MSEL Inject #30:	Facilities call to request assistance with data entry	EEG – EOC Management 5.1
EXPECTED EVENT TIME:	8:15 AM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification to participating facilities via Messaging Module	
WHO DELIVERS:	State ESF 8 Team – Message will be pre-scheduled	
RECIPIENTS:	 Participating facilities, DRCs, Data Cell staff, GOHSEP EOC team, an 	d LERN staff
Objectives:	 Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to execute their responsibilities. 	
EVENT DESCRIPTION:	Participating facilities will call their DRC, the Data Cell, and/or the Cell.	GOHSEP EOC staff to request assistance.
INJECT:	Notification to facilities to begin requesting assistance by calling th	eir DRC, the Data Cell, and/or the GOHSEP EOC staff.
EXPECTED ACTION:	 Facilities call for assistance DRCs, the Data Cell, and the GOHSEP EOC field requests from facilities and are able to enter data and/or provide guidance to facilities. 	
EXPECTED OUTCOME:	 GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Data Cell staff are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested LERN staff are able to adequately assist facilities reporting application access problems. 	
SECONDARY ACTION:	If the State ESF 8 Team does not initiate the inject notification, the request that LERN initiate the notification.	Controller/Evaluator will contact LERN via telephone and

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MSEL Inject #31:	Facilities report power restorations and continuing outages EEG – EOC Management 5.1		
EXPECTED EVENT TIME:	8:15 AM, Wednesday, June 26, 2013		
ACTUAL EVENT TIME:			
Communication			
METHOD:	Notification to participating facilities via Messaging Module		
WHO DELIVERS:	State ESF 8 Team – Message will be pre-scheduled		
RECIPIENTS:	Participating facilities, DRCs, Data Cell staff, GOHSEP EOC team, and LERN staff		
Objectives:	 Information Systems Assess the ability of all critical healthcare facilities to use the appropriate systems in the ESF 8 Portal to provide status information within the requirements published by State ESF 8 officials. Assess the ability of the respective associations to support data collection from facilities in coordination with the Data Cell Assess the ability of facilities to report significant events (such as power loss or fuel shortages) and to support patient evacuations in the appropriate ESF 8 systems. Assess the ability of LERN and other ESF 8 coordinators to effectively use the appropriate ESF 8 systems to execute their responsibilities. 		
EVENT DESCRIPTION:	Participating facilities will use EMSTAT to report power outages and generator use.		
INJECT:	Notification to participating facilities to begin reporting		
Expected Action:	Facilities enter power outage data in EMSTAT. GOHSEP EOC staff, LERN staff, and the Data Cell staff: View the status updates in EMSTAT. Assist participating facilities that request help entering data Data Cell staff produce reports and assemble a situation report for Leadership.		
Expected Outcome:	 Facilities are able to accurately enter the information required to report a power outage in EMSTAT. GOHSEP EOC staff, LERN staff, and the DRCs are able to: Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested. Data Cell staff are able to: Run the reports required to identify non-compliant facilities; Accurately assist facilities in entering data when requested. Accurately enter data on facilities' behalf when requested Process the workload in sufficient time to produce the first UCG Brief for Leadership. LERN staff are able to adequately assist facilities reporting application access problems. 		
SECONDARY ACTION:	 If the State ESF 8 Team does not initiate the inject notification, the Controller/Evaluator will contact LERN via telephone and request that LERN initiate the notification. If the Data Cell does not begin producing Situation Reports, make the request verbally to the Data Cell Manager. 		

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MSEL Inject #32: I hospital staff	Region 7 DRC requests support from LAVA for additional EEG – Medical Surge		
EXPECTED EVENT TIME:	8:15 AM, Wednesday, June 26, 2013		
ACTUAL EVENT TIME:			
Communication			
METHOD:	Notification to participating facilities, GOHSEP EOC staff, CCP staff, and DRCs via Messaging Module		
WHO DELIVERS:	Senior Controller - Message will be pre-scheduled		
RECIPIENTS:	Participating facilities, Hospital DRCs, GOHSEP EOC team, and CCP staff		
OBJECTIVES:	Assess and demonstrate the ability for Region 7 hospitals to request volunteers from the ESF8 system and LAVA.		
EVENT DESCRIPTION:	Participating facilities will use EMSTAT to report power outages and generator use.		
INJECT:	Notification to participating facilities to begin reporting		
EXPECTED ACTION:	 Region 7 hospitals coordinate with Hospital DRC DRC requests assistance from LAVA through ESF 8 system LAVA staff process the request and collect information on potential volunteers LAVA staff and Region 7 staff coordinate the next steps to receiving and managing LAVA volunteers 		
EXPECTED OUTCOME:	 Regional staff are able to: Articulate a need for additional staffing and submit a request through appropriate channels Receive and manage volunteers according to LAVA protocols GOHSEP EOC staff are able to: Accurately handle the resource request according to ESF 8 protocols. CCP Staff are able to: Activate LAVA and submit a request to potential volunteers Provide the Region 7 hospital with information on potential volunteers Articulate the process necessary to request and receive volunteers 		
SECONDARY ACTION:	If the Senior Controller does not initiate the inject notification, the Region 7 Hospital DRC will contact the GOHSEP EOC team via telephone and request assistance from LAVA.		

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MSEL Inject #33: S	State ESF 8 submits PMRs and receives manifests from JPATS EEG – Medical Surge 6.3		
EXPECTED EVENT TIME:	8:15 AM, Wednesday, June 26, 2013		
ACTUAL EVENT TIME:			
Communication			
METHOD:	• Senior Controller notifies the State ESF 8 team to begin producing Patient Movement Request files for transmission to HHS/AMR		
WHO DELIVERS:	Senior Controller		
RECIPIENTS:	State ESF 8 team, DRCs, and GOHSEP EOC team		
Objectives:	 Information Systems Assess the ability of State ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities Assess the ability of AMP leadership staff to produce appropriate Patient Movement Request files Assess the ability of HHS/AMR to receive and process the Patient Movement Requests Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with AMR, HHS, and others involved in their MIEP protocols. Patient Tracking and Medical Surge Assess the ability of State ESF 8 teams to adequately support patient movement requests. 		
EVENT DESCRIPTION:	State ESF 8 teams review Patient Movement Requests by facility and produce the files for transmission to HHS/AMR.		
INJECT:	Senior Controller will verbally notify the State ESF 8 team.		
EXPECTED ACTION:	 State ESF 8 team reviews Patient Movement Requests by facility State ESF 8 team produces the files and emails them to the appropriate contacts at HHS/AMR. HHS/AMR transmit completed patient manifest files 		
EXPECTED OUTCOME:	 State ESF 8 staff and GOHSEP EOC staff are able to: Run the reports required to produce the output required for the patient by AMR Accurately submit the output to JPATS Receive all subsequent manifests from AMR and accurately upload the manifests into the ARR. DRC staff are able to: Access the ARR and produce any needed reports to plan for patient movement and facility support. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. 		
SECONDARY ACTION:	• If the Senior Controller does not verbally notify the State ESF 8 team, Leadership Controller/Evaluator will notify the State ESF 8 team to begin the activity.		

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MSEL Inject #34:	State ESF 8 submits PMRs and receives manifests from TPMRC EEG – Medical Surge 6.3		
EXPECTED EVENT TIME:	8:15 AM, Wednesday, June 26, 2013		
ACTUAL EVENT TIME:			
Communication			
METHOD:	• Senior Controller notifies the State ESF 8 team to begin producing Patient Movement Request files for transmission to TPMRC.		
WHO DELIVERS:	Senior Controller		
RECIPIENTS:	State ESF 8 team, DRCs, and GOHSEP EOC team		
OBJECTIVES: EVENT DESCRIPTION: INJECT:	Information Systems Assess the ability of State ESF 8 teams to use appropriate ESF 8 systems to support patient evacuation activities Assess the ability of AMP leadership staff to produce appropriate Patient Movement Request files Assess the ability of TPMRC to receive and process the Patient Movement Requests Assess the ability of ESF 8 leadership to use the appropriate ESF 8 systems to communicate with TPMRC, HHS, and others involved in their MIEP protocols. Patient Tracking and Medical Surge Assess the ability of State ESF 8 teams to adequately support patient movement requests. State ESF 8 teams review Patient Movement Requests by facility and produce the files for transmission to TPMRC. Senior Controller will verbally notify the State ESF 8 team.		
EXPECTED ACTION:	 State ESF 8 team reviews Patient Movement Requests by facility State ESF 8 team produces the files and emails them to the appropriate contacts at TPMRC. TPMRC transmits completed patient manifest files 		
EXPECTED OUTCOME:	 State ESF 8 staff and GOHSEP EOC staff are able to: Run the reports required to produce the output required for the patient by TPMRC Accurately submit the output to TPMRC Receive all subsequent manifests from TPMRC and accurately upload the manifests into the ARR. DRC staff are able to: Access the ARR and produce any needed reports to plan for patient movement and facility support. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. 		
SECONDARY ACTION:	• If the Senior Controller does not verbally notify the State ESF 8 team, Leadership Controller/Evaluator will notify the State ESF 8 team to begin the activity.		

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MSEL Inject #35:	Leadership requests briefing from Data Cell for 11am UCG	EEG – EOC Management 6.12
EXPECTED EVENT TIME:	9:00 AM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Verbal communication to Data Cell Liaison	
WHO DELIVERS:	Senior Controller suggests to Leadership	
RECIPIENTS:	Data Cell Liaison and Data Cell Manager	
OBJECTIVES:	 Information Systems Assess the ability of the Data Cell to communicate significant information on demand to the ESF 8 leadership, using the appropriate ESF 8 systems and tools. 	
EVENT DESCRIPTION:	Leadership requests the normal UCG briefing from the Data Cell	
INJECT:	Leadership makes a verbal request to the Data Cell Liaison.	
EXPECTED ACTION:	Data Cell Liaison communicates the request to the Data Cell Manager, and the Data Cell produces the UCG brief according to protocol.	
EXPECTED OUTCOME:	 Leadership is able to articulate the briefing requirement if different than the default package. Data Cell is able to produce the required briefing package in sufficient time to brief Leadership before the UCG. 	
SECONDARY ACTION:	• If Senior Controller does not communicate to Leadership, the Controller communicates the need for the UCG briefing to the Data Cell Manager.	

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MSEL Inject #36: I	Data Cell produces UCG Briefing	EEG – EOC Management 6.12
EXPECTED EVENT TIME:	10:15 AM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Verbal communication to Leadership Group and D	ata Cell Liaison, or Notification to Data Cell from Messaging module
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	 Leadership, Data Cell Liaison and Data Cell Manag 	er
	Assess the ability of the Data Cell to organize and	obtain missing status data from facilities failing to report.
OBJECTIVES:	 Assess the ability of the Data Cell to communicate significant information on demand to the ESF 8 leadership, using the appropriate ESF 8 systems and tools. 	
EVENT DESCRIPTION:	Leadership requests the standard briefing package along with any special data requests	
huson	Senior Controller reminds Leadership and Data cell Liaison about the need for the UCG briefing. In the absence of this reminder,	
INJECT:	the Messaging module will send out a scheduled notification to the Data Cell.	
EXPECTED ACTION:	• Leadership articulates the need for the UCG briefing and any additional data, and the Data Cell Liaison communicates this need to the Data Cell Manager. The Data Cell Manager organizes staff to produce the brief.	
EXPECTED OUTCOME:	Data Cell is able to produce the required briefing package in sufficient time to brief Leadership before the UCG.	
SECONDARY ACTION:	 If the Data Cell cannot produce the brief in the time requested, the Data Cell Manager will take screenshots of the EMSTAT dashboards and summarize key indicators using EMSTAT and Tableau standard reports. 	

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MSEL Inject #37: S	Simulated Patient Movement	EEG – Medical Surge 6.3	
EXPECTED EVENT TIME:	10:00 AM, Wednesday, June 26, 2013		
ACTUAL EVENT TIME:			
Communication			
METHOD:	Notification using the Messaging Module		
WHO DELIVERS:	Senior Controller		
RECIPIENTS:	 All participating hospitals, JPATS staff, AMR staff, T 	PMRC staff, GOHSEP EOC staff, DRCs, AMP staff, and Data Cell staff	
Objectives:	 Patient Tracking and Medical Surge Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for patient reception and status reporting during the exercise. Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 		
EVENT DESCRIPTION:	 The various players in patient movement begin activities as follows: AMP staff begin requesting patient movement from hospitals and simulate transport and placement on aircraft JPATS staff simulate patient movement to destination and subsequent patient tracking 		
INJECT:	• The notification instructs the various players to follow their role assignments, including simulated patient transfers from originating facilities, to airports, to destinations, etc.		
EXPECTED ACTION:	 AMP staff and JPATS staff communicate with evacuating hospitals about patient movement. This is done through the various applications and through telephone communications. Patient location data begins to stream in the various applications. 		
Expected Outcome:	 AMP staff are able to: Run the reports required to accurately use the ARR to plan for and manage transportation and track patients through the process. State ESF 8 staff and GOHSEP EOC staff are able to: Run the reports required to accurately use the ARR to monitor patient evacuations. DRC staff are able to: Access the ARR and produce any needed reports to plan for patient movement and facility support. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. 		
SECONDARY ACTION:	•		

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MSEL Inject #38:	Leadership requests additional information after UCG	EEG – EOC Management 6.12
EXPECTED EVENT TIME:	10:30 AM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Verbal communication to Data Cell Liaison and Leadership group	
WHO DELIVERS:	Senior Controller suggests to Leadership	
RECIPIENTS:	Data Cell Liaison and Data Cell Manager	
OBJECTIVES:	 Information Systems Assess the ability of the Data Cell to communicate significant information on demand to the ESF 8 leadership, using the appropriate ESF 8 systems and tools. 	
EVENT DESCRIPTION:	Leadership requests additional data and reports about patient evacuation activities.	
INJECT:	Senior Controller briefs Leadership about the need for situational visibility	
EXPECTED ACTION:	Leadership articulates a request to the Data Cell Liaison embedded with the Leadership group.	
EXPECTED OUTCOME:	• Leadership is able to articulate the requirements for the additional data.	
EXPECTED OUTCOME.	Data Cell staff are able to interpret the request into an action plan to obt	ain the information
SECONDARY ACTION:	If the Senior Controller fails to trigger the request from Leadership, the C for a patient evacuation status report by facility.	ontroller makes a verbal request of the Data Cell manager

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MSEL Inject #39:	Data Cell produces report/data for Leadership	EEG – EOC Management 6.12
EXPECTED EVENT TIME:	10:45 AM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Verbal communication to Data Cell Liaison and Leadership group	
WHO DELIVERS:	Senior Controller suggests to Leadership	
RECIPIENTS:	Data Cell Liaison and Data Cell Manager	
Objectives:	 Information Systems Assess the ability of the Data Cell to communicate significant information on demand to the ESF 8 leadership, using the appropriate ESF 8 systems and tools. 	
EVENT DESCRIPTION:	Leadership requests additional data and reports about patient evacuation activities.	
INJECT:	Senior Controller briefs Leadership about the need for situational visibility	
EXPECTED ACTION:	Leadership articulates a request to the Data Cell Liaison embedded with the Leadership group.	
EXPECTED OUTCOME:	Data Cell is able to produce the required reports to meet the demands of Leadership.	
SECONDARY ACTION:	• If the Data Cell cannot produce the situation report before the scheduled end of the exercise, the Controller can modify the request to a simpler data sample. This can be done in an ad hoc telephone conference with the Senior Controller.	

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MSEL Inject #40: J	PATS begins to report patient movement and location	EEG – Medical Surge 6.3
EXPECTED EVENT TIME:	10:45 AM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Automated data exchange between JPATS and the ARR	
Who Delivers:	Automated process	
RECIPIENTS:	ARR and players accessing ARR	
Objectives:	 Patient Tracking and Medical Surge Assess the ability of hospitals, nursing homes and adult residential care facilities to effectively implement patient tracking for patient reception and status reporting during the exercise. 	
EVENT DESCRIPTION:	The ARR should begin receiving data from JPATS about patient movement and locations. The exact process will depend upon the nature of the integration between JPATS and ARR	
INJECT:	After simulated patient movement begins, data should begin to flow.	
EXPECTED ACTION:	JPATS players simulate patient movement, and the ARR begins to receive data from JPATS.	
	 JPATS is able to accurately transmit patient movement data to the ARR. The ARR is able to accurately receive the JPATS data. State ESF 8 staff and GOHSEP EOC staff are able to: 	
EXPECTED OUTCOME:	 Run the reports required to accurately use the ARR to monitor patient evacuations. DRC staff are able to: Access the ARR and produce any needed reports to plan for patient movement and facility support. Data Cell staff are able to: Run the reports required to gain accurate situational visibility on evacuations. Participating facilities can use the ARR to see the progress of their patients as the evacuation proceeds. 	
SECONDARY ACTION:	If the integration with JPATS fails, State ESF 8 staff will communicate via the staff will be staff will communicate via the staff will communicate via the staff will be staff will be staff.	with JPATS staff about alternative data exchange methods.

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MSEL Inject #41: I	End Exercise Day 2	EEG – Communications 1.3
EXPECTED EVENT TIME:	12:00 PM, Wednesday, June 26, 2013	
ACTUAL EVENT TIME:		
Communication		
METHOD:	Notification using Messaging Module	
WHO DELIVERS:	Senior Controller	
RECIPIENTS:	All exercise participants	
OBJECTIVES:	 Communications Assess the ability of ESF-8 to establish and maintain communications with and disseminate information to critical healthcare facilities using appropriate ESF 8 systems. 	
EVENT DESCRIPTION:	Notification advises that exercise play has ended for the exercise.	
INJECT:	Senior Controller initiates notification at designated end time.	
EXPECTED ACTION:	All parties receive notification and end exercise play.	
EXPECTED OUTCOME:	Exercise ends on time.	
SECONDARY ACTION:	 If Senior Controller fails to configure and/or initiat notifications. 	e notification, contact LERN and instruct LERN to configure and execute the

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CONTROLLER/EVALUATOR INFORMATION AND GUIDANCE

Exercise Controller Organization

Controllers, evaluators, and personnel essential to the exercise are collectively referred to as the exercise staff organization. The exercise staff organization, current at the publication of this

document, is shown in the graphic at right. Control of the exercise will be established through an exercise controller organization. This organization will control all exercise activities at all exercise locations.

Exercise Control

The 2013 ESF 8 Functional Exercise will be conducted on June 25th through June 26th, starting at 8:00 AM on the 25th. Exercise play is scheduled for 1.5 days (scheduled to end at 12:00 PM on the 26th) or until the Exercise Director and Senior Controller determine that the exercise objectives have been met at each venue. The Exercise Director will announce the start of the exercise. The Exercise Director will announce exercise suspension or termination and will instruct participants to stop in place safely.

If an actual emergency occurs, the exercise may be suspended or terminated at the discretion of the Exercise Director, depending on the nature of the incident. The designated phrase in case of a medical emergency is "real-world emergency." The Exercise Director will announce resumption of the exercise.

Because the exercise is of limited duration and scope, the physical description of what would fully occur at the incident site and surrounding areas will be relayed to the players by controllers. Controllers will "paint the picture" for players—verbally or with limited written materials—regarding what is happening in and around the incident scene.

The MSEL (the first part of this document) outlines benchmarks and injects that drive exercise play and provides realistic input to exercise players. It provides information that is expected to emanate from simulated organizations (e.g., nonparticipating organizations, agencies, and individuals that usually would respond to a situation).

Exercise Director

Exercise Support Team
Point of Contact
(Senior Controller)

GOHSEP Controller
Data Cell Controller
LERN Controller
AMP Controller
Region 6 Controller

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The MSEL consists of the following two parts:

• **Timeline.** This is a list of key exercise events, including scheduled injects and expected player actions. The timeline is used to track exercise events relative to desired response activities.

• **Injects.** An individual event inject is a detailed description of each exercise event. The inject includes the following pieces of information: inject time, intended recipient, responsible controller, inject type, a detailed description of the event, and the expected player action.

Controller Responsibilities

Controller Responsibilities

Exercise Director

- Oversees all exercise functions
- Oversees and remains in contact with controllers and evaluators
- Debriefs controllers and evaluators after the exercise
- Oversees setup and cleanup of exercise and positioning of controllers and evaluators
- Serves as safety officer for his or her site

Venue Controller

- Issues exercise materials to players
- · Monitors exercise timeline
- Provides input to players (i.e., injects) as described in MSEL
- Serves as safety officer for his or her site

For specific controller assignments, please see Appendix A.

Controller Package

Controllers and evaluators will receive their exercise materials at the Controller and Evaluator Briefing. The controller package will consist of the ExPlan, this MSEL Package, activity logs, and other exercise tools as necessary. Controllers may reorganize the material so information that is critical to their specific assignment is readily accessible. Controllers must bring their packages to the exercise. Controllers may also bring additional professional materials specific to their assigned exercise activities.

Incident Simulation

Because the exercise is of limited duration and scope, the physical description of what would fully occur at the incident site and surrounding areas will be relayed to the players by controllers. Controllers will "paint the picture" for players—verbally or with limited written materials—regarding what is happening in and around the incident scene.

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Communications Plan

All spoken and written communication will start and end with the statement "This is an exercise."

Controller Communications

The principal method of communication for controllers during the exercise will be the ESF 8 Messaging module and in-place agency communication systems such as the telephone and email. In addition, the controllers will use the radio channels designated for HRSA.

A list of key telephone numbers, email addresses, and radio call signs will be available in a Communications Directory before the exercise starts. Controller communications will link control personnel at all play areas and will remain separate from player communications. In no case will controller communications interfere with or override player communications.

Player Communications

Players will use routine, in-place agency communication systems such as the ESF-8 Portal Messaging module. Additional communication assets may be made available as the exercise progresses. Each venue will coordinate its own internal communication networks and channels. The primary means of communication among the exercise players will be the ESF-8 messaging module, ESF-8 portal, HRSA radio channels, and telephone.

Controller Instructions

- Before the Exercise
 - ⇒ Review appropriate emergency plans, procedures, and protocols.
 - ⇒ Review appropriate exercise package materials, including the objectives, scenario, injects or implementers, safety and security plans, and evaluator instructions.
 - ⇒ Attend required briefings.
 - ⇒ Review the exercise objectives and controller package for your area of responsibility.
 - ⇒ Report to the exercise check-in location at the time designated in the exercise schedule, meet with the exercise staff, and present the Player Briefing.
 - ⇒ Be at the appropriate location at least 15 minutes before the exercise starts. If you are not assigned to a specific site, be in place to meet participants at least 15 minutes before the exercise starts.

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⇒ Obtain or locate necessary communications equipment, and test it to ensure that you can communicate with other controllers and the Exercise Director.

During the Exercise

- ⇒ Wear controller identification items (i.e., hat and badge). Controller hats and badges will be issued at the Controller and Evaluator Briefing on [Date].
- ⇒ Avoid personal conversations with exercise players.
- ⇒ If you have been given injects, deliver them to appropriate players at the time indicated in the MSEL (or as directed by the Exercise Director). Note: If the information depends on some action to be taken by the player, do not deliver the inject until the player has earned the information by successfully accomplishing the required action.
- ⇒ When you deliver an inject, notify the Exercise Director and note the time you delivered the inject and player actions.
- ⇒ Receive and record exercise information from players that would be directed to nonparticipating organizations.
- ⇒ Record all significant events you observe.
- ⇒ Observe and record exercise artificialities that interfere with exercise realism. If an exercise artificiality interferes with exercise play, report it to the Exercise Director.
- ⇒ Begin and end all exercise communications with the statement "This is an exercise." This precaution is taken so that anyone who overhears the conversation will not inadvertently mistake exercise play for an actual emergency.
- ⇒ Do not prompt players regarding what a specific response should be, unless an inject directs you to do so. Clarify information as long as doing so does not provide coaching.
- ⇒ Ensure that all observers and media personnel stay out of the exercise activity area. If you need assistance, notify the Exercise Director.
- ⇒ Do not give information to players about scenario event progress or other participants' methods of problem resolution. Players are expected to obtain information through their own resources.
- ⇒ The Exercise Director will notify you when the exercise has been suspended or terminated. The exercise will be terminated when the Exercise Director determines that all exercise objectives have been met or enough time has elapsed for exercise objectives to be demonstrated.

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After the Exercise

⇒ Distribute copies of Participant Feedback Forms and pertinent documentation. After participants have completed these forms, collect the forms and give them to the Exercise Director. Coordinate this task with the evaluator in your area.

⇒ All controllers are expected to conduct a Hot Wash at their venue and, in coordination with the venue evaluator, take notes on findings identified by exercise players. Before the Hot Wash, do not discuss specific issues or problems with exercise players. At exercise termination, summarize your notes and prepare for the Controller and Evaluator Debriefing. Have your summary ready for the Exercise Director.

Assessment, Review and Analysis of the Exercise

The goal of exercise evaluation is to validate strengths and identify improvement opportunities for the participating organization(s). In the 2013 ESF 8 Functional Exercise, evaluation will attempt to validate plans, procedures, and protocols of ESF 8 and participating agencies and determine their level of capability with regard to the exercised target capabilities. Validation attempts to answer the following questions:

- Were established plans, procedures, and protocols followed during the exercise?
- Did the agencies do what they said they were going to do?
- Were the plans, procedures, and protocols effective?
- What levels of capabilities do the plans, policies, and procedures establish?

This validation is accomplished by the following means:

- Observing the event and collecting supporting data
- Analyzing the data to compare performance against expected outcomes
- Determining what changes need to be made to procedures, plans, staffing, equipment, communications, organizations, and interagency coordination to ensure expected outcomes

The evaluation results will provide an opportunity to identify ways to build on strengths and improve capabilities. Because jurisdictions are testing new and emerging plans, skills, resources, and relationships in response to a changed homeland security environment, every exercise or event can be expected to result in multiple findings and recommendations for improvement.

Hot Wash

Immediately after completion of exercise play, controllers will facilitate a Hot Wash with players from their assigned location. The Hot Wash is an opportunity for players to express their opinions about the exercise and their own performance. At this time, evaluators can seek clarification regarding certain actions and what prompted players to take them. The Hot Wash should not last more than 30 minutes. Evaluators should take notes during the Hot Wash and include these observations in their analysis.

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Controller and Evaluator Debriefing

Controllers, evaluators, and selected exercise participants will attend a facilitated Controller and Evaluator Debriefing the day after the exercise concludes and is currently scheduled for June 26th starting at 1:00 PM. During this debriefing, these individuals will discuss their observations of the exercise in an open environment to clarify actions taken during the exercise. Evaluators should take this opportunity to complete their EEGs for submission to the Lead Evaluator and begin the analysis process outlining issues to be included in the AAR.

Evaluations

All evaluations are preliminary and may be revised on the basis of information from other controllers, evaluators, or players. If a controller or evaluator did not observe specific aspects of an organization's performance, exercise players may be asked to comment. The evaluation should indicate that this information was provided by players.

Participant Feedback Forms

Participant Feedback Forms will be used to document participant information about the exercise. The controller will distribute these forms during the Hot Wash. The forms will be collected afterward, along with attendance or participation rosters. Controllers should emphasize to players that these forms provide the opportunity for them to comment candidly on emergency response activities and exercise effectiveness.

After Action Conference

The After Action Conference, scheduled for July 11th, is a forum for jurisdiction officials to hear the results of the evaluation analysis, validate findings and recommendations in the draft AAR, and begin development of the IP.

Exercise Report

An exercise AAR/IP will be prepared to document the evaluation of overall exercise performance. The AAR/IP will include the exercise schedule, scenario, players' activities, evaluations, issues, opportunities, and best practices. The AAR also will contain the following:

- A brief summary, with introductory and general statements noting the exercise scope, purpose, objectives, players, and overall performance assessment
- Assessments for each capability observed
- Issues and recommendations suggested by controller, evaluator, and player comments

A draft AAR will be provided to participating organizations for comment before the After Action Conference is held.

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Other Evaluation Information

The goal of exercise evaluation is to validate strengths and identify improvement opportunities for the participating organization(s). In the 2013 ESF 8 Functional Exercise, evaluation will attempt to validate plans, procedures, and protocols of ESF 8 and participating agencies and determine their level of capability with regard to the exercised target capabilities. Validation attempts to answer the following questions:

- Were established plans, procedures, and protocols followed during the exercise?
- Did the agencies do what they said they were going to do?
- · Were the plans, procedures, and protocols effective?
- What levels of capabilities do the plans, policies, and procedures establish?

This validation is accomplished by the following means:

- Observing the event and collecting supporting data
- Analyzing the data to compare performance against expected outcomes
- Determining what changes need to be made to procedures, plans, staffing, equipment, communications, organizations, and interagency coordination to ensure expected outcomes

The evaluation results will provide an opportunity to identify ways to build on strengths and improve capabilities. Because jurisdictions are testing new and emerging plans, skills, resources, and relationships in response to a changed homeland security environment, every exercise or event can be expected to result in multiple findings and recommendations for improvement.

Evaluation Basics

Remember, your experience and expertise are your most important tools. Experienced evaluators use the following techniques for effective evaluation:

- Use EEGs to confirm that evaluation objectives are met.
- Take detailed notes concerning significant activities observed, including the time they were initiated or completed.
- When more than one evaluator is assigned to an area, divide responsibilities to ensure detailed evaluation of player activities.
- Stay in proximity to player decision-makers.
- Focus on critical tasks, as specified in the EEGs.

For specific EEGs linked to MSEL injects, please see Attachment B.

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Recording Important Events

Although numerous events may occur simultaneously, evaluators do not need to record all the action. Knowing which events are important helps evaluators eliminate superfluous data and provide the kind of information that is most useful for evaluation. Important events that evaluators should record include the following:

- Initiating scenario events
- Actions of players in relation to the event
- Key decisions made by managers and the times these decisions are made
- Deviations from plans and implementation procedures
- Times when significant actions are completed
- Equipment used

What to Look For

Individuals preparing the exercise report will analyze the results provided by all evaluators to achieve an integrated evaluation of exercised plans and capabilities. Their analysis will focus on the timing of key events, decisions made, and actions taken. To assist in that analysis, you should focus on the following areas:

- Timeliness in actions
- Communication among players and organizations
- Direction and coordination of field activities
- Monitoring and assessing events
- Command and control
- Creative player problem-solving, potentially beyond current plans and implementation procedures
- Plans or procedures that affect player efforts
- Equipment issues in relation to player efforts

Placement and Monitoring

Evaluators should be located so they can observe player actions and hear conversations without interfering with those activities. In certain conditions, more than one evaluator may be needed in a particular setting or area.

For specific evaluator assignments, please see Appendix A.

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Appendix A: Controller/Evaluator Assignments

Note: This is a sample list of controller and evaluator assignments. The positions should be modified based on the type and scope of the exercise. For example, if the exercise will not include a Simulation Cell, than a controller does not need to fulfill that function. Both controllers and evaluators may be assigned to a second area if play has been completed in the first.

Name	Role	Position
GOHSEP EOC		
Faith Roussell-Willis	Controller/Evaluator	Site controller, site safety officer, evaluator
Leadership		
Nicole Coursey	Controller/Evaluator	Site controller, site safety officer, evaluator
Data Cell		
Henry Yennie	Controller/Evaluator	Site controller, site safety officer, evaluator
LERN Communications	Center	
	Controller/Evaluator	Site controller, site safety officer, evaluator
Region 6		
	Controller/Evaluator	Site controller, site safety officer, evaluator
Region 3 AMP		
	Controller/Evaluator	Site controller, site safety officer, evaluator
Region 9 AMP		
	Controller/Evaluator	Site controller, site safety officer, evaluator

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Appendix B: EEGs and Scenario Maps

The following table summarizes the mapping between the scenario injects and the Activities in the EEG:

Event #	Start Time	Responsible Controller	Event	EEG	EEG Activities
1	10:00 AM	Senior Controller	GOHSEP EOC Notification Message	1 - EOC Management	1.1, 3.2
2	10:30 AM	Senior Controller	Data Cell Notification Message	1 - EOC Management	1.1, 3.2
3	10:45 AM	Senior Controller	Facility Activation Message	2 - Communications	1.2, 1.3, 1.4; 2.3, 2.4, 2.6
4	8:00 AM	Senior Controller	Briefing Day 1	1 - EOC Management	1.2, 1.3, 2.1, 2.4
5	8:30 AM	Senior Controller	Start Exercise Day 1	1 - EOC Management	1.3
6	9:00 AM	Senior Controller	Facility Reporting Requirements	2 - Communications	1.2
7	9:30 AM	Senior Controller	Notification to Facilities for Reporting Requirements	2 - Communications	1.2
8	10:00 AM	Senior Controller	Nursing homes begin to upload patients to EMSTAT	4 - Medical Surge	6.3
9	10:00 AM	Data Cell Controller/Evaluator	Data Cell begins monitoring compliance	1 - EOC Management	3.6
10	10:15 AM	Senior Controller	H-72 Hour Conference Call	2 - Communications	1.2
11	10:30 AM	GOHSEP EOC Controller/Evaluator	Facilities begin reporting power outages	1 - EOC Management	5.1
12	11:00 AM	Senior Controller	Hospitals begin upload of patients to ARR	4 - Medical Surge	6.3
13	11:30 AM	GOHSEP EOC Controller/Evaluator	Facilities begin requesting fuel	1 - EOC Management	5.1
14	11:30 AM	GOHSEP EOC Controller/Evaluator	Facilities call to request assistance with data entry	1 - EOC Management	5.1
15	12:00 PM	AMP Controller/Evaluator	AMP activation in Regions 3 and 9	4 - Medical Surge	2.4, 6.3
16	1:00 PM	Data Cell Controller/Evaluator	Leadership requests briefing from Data Cell for 3pm UCG	1 - EOC Management	6.12
17	1:00 PM	GOHSEP EOC Controller/Evaluator	Nursing home requests assistance evacuating	1 - EOC Management	5.1
18	1:00 PM	GOHSEP EOC Controller/Evaluator	Facilities request replacement generators	1 - EOC Management	5.1
19	1:00 PM	GOHSEP EOC Controller/Evaluator	Nursing homes report the start of evacuations	4 - Medical Surge	6.3
20	1:00 PM	Senior Controller	Mass Casualty incident begins in Region 6	3 - Triage	1.2, 1.3, 1.4, 1.8, 2.1, 3.2, 5.3
21	2:00 PM	Senior Controller	Mass Fatality group responds to 35 mass casualty deaths in Region 6	5 - Mass Fatality	All in Section 1
22	2:30 PM	GOHSEP EOC Controller/Evaluator	Hospitals complete patient uploads	4 - Medical Surge	6.3
23	1:15 PM	Data Cell Controller/Evaluator	Data Cell produces UCG Briefing	1 - EOC Management	6.12
24	3:00 PM	AMP Controller/Evaluator	DRCs review patient data in ARR	4 - Medical Surge	6.3

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Event #	Start Time	Responsible Controller	Event	EEG	EEG Activities
25	3:30 PM	GOHSEP EOC Controller/Evaluator	State ESF 8 reviews patient data in ARR	4 - Medical Surge	6.3
26	3:40 PM	GOHSEP EOC Controller/Evaluator	State ESF 8 produces Form 1s for evacuating hospitals	4 - Medical Surge	6.3
27	4:00 PM	Senior Controller	End Exercise Day 1	1 - EOC Management	1.3
28	8:00 AM	Senior Controller	Briefing Day 2	1 - EOC Management	1.2, 1.3, 2.1, 2.4
29	8:15 AM	Senior Controller	Start Exercise Day 2	1 - EOC Management	1.3
30	8:15 AM	GOHSEP EOC Controller/Evaluator	Facilities call to request assistance with data entry	1 - EOC Management	5.1
31	8:15 AM	GOHSEP EOC Controller/Evaluator	Facilities report power restorations and continuing outages	1 - EOC Management	5.1
32	8:15 AM	Senior Controller	Region 7 DRC requests support from LAVA for additional hospital staff	4 - Medical Surge	6.3
33	8:15 AM	GOHSEP EOC Controller/Evaluator	State ESF 8 submits PMRs and receives manifests from JPATS	4 - Medical Surge	6.3
34	8:15 AM	GOHSEP EOC Controller/Evaluator	State ESF 8 submits PMRs and receives manifests from TPMRC	4 - Medical Surge	6.3
35	9:00 AM	Data Cell Controller/Evaluator	Leadership requests briefing from Data Cell for 11am UCG	1 - EOC Management	6.12
36	9:15 AM	Data Cell Controller/Evaluator	Data Cell produces UCG Briefing	1 - EOC Management	6.12
37	10:00 AM	GOHSEP EOC Controller/Evaluator	Simulated Patient Movement	4 - Medical Surge	6.3
38	10:30 AM	Data Cell Controller/Evaluator	Leadership requests additional information after UCG	1 - EOC Management	6.12
39	10:45 AM	Data Cell Controller/Evaluator	Data Cell produces report/data for Leadership	1 - EOC Management	6.12
40	10:45 AM	GOHSEP EOC Controller/Evaluator	JPATS begins to report patient movement and location	4 - Medical Surge	6.3
41	12:00 PM	Senior Controller	End Exercise Day 2	1 - EOC Management	1.3

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EEG – EOC Management

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Capability Description:

Emergency Operations Center (EOC) management is the capability to provide multi-agency coordination (MAC) for incident management by activating and operating an EOC for a pre-planned or no-notice event. EOC management includes: EOC activation, notification, staffing, and deactivation; management, direction, control, and coordination of response and recovery activities; coordination of efforts among neighboring governments at each level and among local, regional, State, and Federal EOCs; coordination of public information and warning; and maintenance of the information and communication necessary for coordinating response and recovery activities. Similar entities may include the National (or Regional) Response Coordination Center (NRCC or RRCC), Joint Field Offices (JFO), National Operating Center (NOC), Joint Operations Center (JOC), Multi-Agency Coordination Center (MACC), Initial Operating Facility (IOF), etc.

Capability Outcome:

The event is effectively managed through multi-agency coordination for a pre-planned or no-notice event.

Jurisdiction or Organization:	Name of Exercise: 2013 ESF 8 Exercise	
Location: Baton Rouge, LA 70821	Date: 6/25/2013 - 6/26/2013	
Evaluator:	Evaluator Contact Info:	

Note to Exercise Evaluators: Only review those activities listed below to which you have been assigned.

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Activity 1: Activate EOC/MACC/IOF

Activity Description: In response to activation, perform incident notifications, recall essential personnel, and stand-up EOC/MACC/IOF systems to provide a fully staffed and operational EOC/MACC/IOF.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Completion
1.1 (Res.B1c 4.3)	Activate, alert, and request response from EOC/MACC/IOF personnel Rosters are accessible and up-to-date - Appropriate staff are notified to report, as necessary, per the plan	Time: Task Completed? Fully [] Partially [] Not [] N/A []
	EOC/MACC/IOF system is staffed and operational	Yes [] No []
1.2 (Res.B1c 4.4)	Brief incoming personnel Staff are assigned to functional area - Situation briefings and assignments are based upon mission tasking and functional area activation	Time: Task Completed? Fully [] Partially [] Not [] N/A []
1.3 (n/a)	Activate EOC/MACC/IOF Facility is equipped and secure to meet operational needs [Reference: NFPA-1221] - Insure back-up EOC/MACC/IOF is operable and accessible - [Note: NFPA 1221 is a voluntary consensus standard addressing Public Safety Answering Point (PSAP) operations, equipment, and protocols only. This is not applicable to a stand-alone EOC/MACC/IOF. In many instances these facilities will not be co-mingled with the PSAP]	Time: Task Completed? Fully [] Partially [] Not [] N/A []

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Activity 2: Direct EOC/MACC/IOF Tactical Operations

Activity Description: Following activation of the EOC/MACC/IOF system, staff and organize the EOC/MACC/IOF in accordance with the comprehensive emergency management plan (CEMP) and the requisite policies, procedures, and directives.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Completion	
2.1 (Res.B1c 3.1)	Establish organization/operation of EOC/MACC/IOF.	Time: Task Completed? Fully [] Partially [] Not [] N/A []	
	EOC/MACC/IOF is appropriately staffed to meet incident demands	Yes [] No []	
2.4 (Res.B1c 3.3.1)	Coordinate management of EOC/MACC/IOF with other ICS operations.	Time: Task Completed? Fully [] Partially [] Not [] N/A []	

Activity 3: Gather and Provide Information

Activity Description: Upon establishing EOC/MACC/IOF operations, gather, organize, and document incident situation and resource information from all sources to maintain situational awareness within the EOC/MACC/IOF, and horizontally and vertically within the National Incident Management System (NIMS).

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

Task /Observation Keys Time of Observation/ Task Completion	
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3.2 (Res.B1c 5.1)	Ensure appropriate notifications are made. - Appropriate organizations and responders contacted as per plans - Senior leadership and elected officials are notified and briefed - Current notification procedures used to contact all affected agencies - Joint Information Center (JIC) & Rumor Control implemented, coordinated, and maintained	Time: Task Completed? Fully [] Partially [] Not [] N/A []
3.6 (Res.B1c 5.2)	Collect, analyze, and disseminate information and intelligence.	Time: Task Completed? Fully [] Partially [] Not [] N/A []

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Activity 5: Prioritize and Provide Resources

Activity Description: Upon identification of need/issues, establish priorities, provide strategic direction, coordinate and resolve multi-agency resource issues, and provide resources.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Completion Time: Task Completed? Fully [] Partially [] Not [] N/A []		
5.1 (Res.B1c 7.3.1)	Facilitate resolution to legal, policy, political, social, and economic sensitivities of the affected jurisdiction as they impact response and recovery operations. - Resources are allocated to minimize/address sensitivity issues - Resolution facilitated among affected parties - Issues are identified for elevation to a higher level for decision, if needed - Resolution of issue implemented, communicated, monitored, at all levels			
	EOC/MACC/IOF recognizes the need to implement mutual aid agreements (MAAs)	Yes [] No []		
	Mutual Aid, State, and/or Federal resources are requested as needed during an incident based on availability of resources and mutual aid	Yes [] No []		
	EOC/MACC/IOF consults appropriate decision-makers and facilitates resolution of needs/issues in a timely manner	Yes [] No []		
	Designate resource staging areas, Logistical Bases, and Logistical Staging Areas (LSAs)	Yes [] No []		
	Request activation of pre-positioned resources	Yes [] No []		

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Activity 6: Provide EOC/MACC/IOF Connectivity

Activity Description: Upon notification, initiate interoperable system operations, in addition to maintaining, managing, and assuring protection of the interoperable communications systems until the EOC/MACC/IOF is ordered to be deactivated.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Completion	
6.1 (ComC 4.2)	Implement response communications interoperability plans and protocols. - Interoperable communications equipment, channels and protocols are activated, monitored, maintained, and expanded, as necessary - Staff and management are informed of interoperable communications requirements during incident briefings	Time: Task Completed? Fully [] Partially [] Not [] N/A []	
6.2 (Res.B2a 3.5.2)	Communicate internal incident response information. - Accurate and clear incident information received from all sources - Incident information logged and passed on to appropriate command staff - All participants are aware of the current incident information and incident status - All participants have easy access to needed information, as appropriate	Time: Task Completed? Fully [] Partially [] Not [] N/A []	
6.10 (ComC 5.3.3)	Assure redundant communications circuits/channels are available for use. - Interoperable Communications Plans provide for an appropriate number of redundant channels - Information on communications circuits/channels are provided to all response and management agencies at all levels	Time: Task Completed? Fully [] Partially [] Not [] N/A []	
6.12 (ComC 5.5)	Maintain a common operating picture (COP) for real time sharing of information with all the participating entities at all levels to ensure all responder agencies are working from the same information. - Interoperable communication systems support maintaining up to date information between EOC/MACC/IOF/JFO and all responder agencies and leadership to include Federal, Regional, State, County, Local, and Tribal fixed and mobile Operations centers - Responder agencies and leadership have easy access to needed information at all levels of incident management structure	Time: Task Completed? Fully [] Partially [] Not [] N/A []	

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Exercise Evaluation Guide Analysis Sheets

The purpose of this section is to provide a narrative of what was observed by the evaluator/evaluation team for inclusion within the draft After Action Report/Improvement Plan. This section includes a chronological summary of what occurred during the exercise for the observed activities. This section also requests the evaluator provide key observations (strengths or areas for improvement) to provide feedback to the exercise participants to support sharing of lessons learned and best practices as well as identification of corrective actions to improve overall preparedness.

Observations Summary

Write a general chronological narrative of responder actions based on your observations during the exercise. Provide an overview of what you witnessed and, specifically, discuss how this particular Capability was carried out during the exercise, referencing specific Tasks where applicable. The narrative provided will be used in developing the exercise After-Action Report (AAR)/Improvement Plan (IP).

[Insert text electronically or on separate pages]

Evaluator ObservationsRecord your key observations using the structure provided below. Please try to provide a minimum of three observations for each section. There is no maximum (three templates are provided for each section; reproduce these as necessary for additional observations). Use these sections to discuss strengths and any areas requiring improvement. Please provide as much detail as possible, including references to specific Activities and/or Tasks. Document your observations with reference to plans, procedures, exercise logs, and other resources. Describe and analyze what you observed and, if applicable, make specific recommendations. Please be thorough, clear, and comprehensive, as these sections will feed directly into the drafting of the After-Action Report (AAR). Complete electronically if possible, or on separate pages if necessary.

Strengths
1. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis: (Include a discussion of what happened. When? Where? How? Who was involved? Also describe the root cause of the observation, including contributing factors and what led to the strength. Finally, if applicable, describe the positive consequences of the actions observed.)

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2) References: (Include references to plans, policies, and procedures relevant to the observation)
3) Recommendation: (Even though you have identified this issue as a strength, please identify any recommendations you may have for enhancing performance further, or for how this strength may be institutionalized or shared with others.)
2. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
3. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
Areas for Improvement

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Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis: (Include a discussion of what happened. When? Where? How? Who was involved? Also describe the root cause of the observation, including contributing factors and what led to the strength. Finally, if applicable, describe the negative consequences of the actions observed.)
2) References: (Include references to plans, policies, and procedures relevant to the observation)
3) Recommendation: (Write a recommendation to address the root cause. Relate your recommendations to needed changes in plans, procedures, equipment, training, mutual aid support, management and leadership support.)
2. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
3. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:

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3) Recommendation:

EOC Management to MSEL Links:

Event #	Start Time	Responsible Controller	Event	EEG	EEG Activities
1	10:00 AM	Senior Controller	GOHSEP EOC Notification Message	1 - EOC Management	1.1, 3.2
2	10:30 AM	Senior Controller	Data Cell Notification Message	1 - EOC Management	1.1, 3.2
4	8:00 AM	Senior Controller	Briefing Day 1	1 - EOC Management	1.2, 1.3, 2.1, 2.4
5	8:30 AM	Senior Controller	Start Exercise Day 1	1 - EOC Management	1.3
9	10:00 AM	Data Cell Controller/Evaluator	Data Cell begins monitoring compliance	1 - EOC Management	3.6
11	10:30 AM	GOHSEP EOC Controller/Evaluator	Facilities begin reporting power outages	1 - EOC Management	5.1
13	11:30 AM	GOHSEP EOC Controller/Evaluator	Facilities begin requesting fuel	1 - EOC Management	5.1
14	11:30 AM	GOHSEP EOC Controller/Evaluator	Facilities call to request assistance with data entry	1 - EOC Management	5.1
16	1:00 PM	Data Cell Controller/Evaluator	Leadership requests briefing from Data Cell for 3pm UCG	1 - EOC Management	6.12
17	1:00 PM	GOHSEP EOC Controller/Evaluator	Nursing home requests assistance evacuating	1 - EOC Management	5.1
18	1:00 PM	GOHSEP EOC Controller/Evaluator	Facilities request replacement generators	1 - EOC Management	5.1
23	1:15 PM	Data Cell Controller/Evaluator	Data Cell produces UCG Briefing	1 - EOC Management	6.12
27	4:00 PM	Senior Controller	End Exercise Day 1	1 - EOC Management	1.3
28	8:00 AM	Senior Controller	Briefing Day 2	1 - EOC Management	1.2, 1.3, 2.1, 2.4
29	8:15 AM	Senior Controller	Start Exercise Day 2	1 - EOC Management	1.3
30	8:15 AM	GOHSEP EOC Controller/Evaluator	Facilities call to request assistance with data entry	1 - EOC Management	5.1
31	8:15 AM	GOHSEP EOC Controller/Evaluator	Facilities report power restorations and continuing outages	1 - EOC Management	5.1
35	9:00 AM	Data Cell Controller/Evaluator	Leadership requests briefing from Data Cell for 11am UCG	1 - EOC Management	6.12
36	9:15 AM	Data Cell Controller/Evaluator	Data Cell produces UCG Briefing	1 - EOC Management	6.12
38	10:30 AM	Data Cell Controller/Evaluator	Leadership requests additional information after UCG	1 - EOC Management	6.12
39	10:45 AM	Data Cell Controller/Evaluator	Data Cell produces report/data for Leadership	1 - EOC Management	6.12
41	12:00 PM	Senior Controller	End Exercise Day 2	1 - EOC Management	1.3

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EEG – Communications

Exercise Evaluation Guide: 2013 ESF 8 Exercise

Capability Description:

Communications is the fundamental capability within disciplines and jurisdictions that practitioners need to perform the most routine and basic elements of their job functions. Agencies must be operable, meaning they possess sufficient wireless communications capabilities to meet their daily internal and emergency communication requirements before they focus on interoperability.

Capability Outcome:

A continuous flow of critical information is maintained as needed among multi-jurisdictional and multi-disciplinary emergency responders, command posts, agencies, and governmental officials for the duration of the emergency response operation in compliance with National Incident Management System (NIMS). To accomplish this, the jurisdiction has a continuity of operations plan for public safety communications to include the consideration of critical components, networks, support systems, personnel, and an appropriate level of redundant communications systems in the event of an emergency.

Jurisdiction or Organization:	Name of Exercise: 2013 ESF 8 Exercise	
Location: Baton Rouge, LA 70821	Date: 6/25/2013 - 6/26/2013	
Evaluator: Evaluator Contact Info:		
Note to Exercise Evaluators: Only review those activities listed below to which you have been assigned.		

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Activity 1: Alert and Dispatch

Activity Description: In response to an incident alert, notify and provide communications management until the Incident Command (IC), Emergency Operations Center (EOC), and Emergency Management Agency (EMA) are activated.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Completion
1.2 (ComC 4.2.1)	Communicate incident response information per agency protocols. - Timely, accurate and clear incident information passed to dispatched response teams - Incident information relayed to pertinent incident management facilities (e.g., Incident Command Post (ICP), Emergency Operations Center/Multi Agency Coordination Center (EOC/MACC), etc.) - Incident information logged and disseminated to communications staff, as appropriate	Time: Task Completed? Fully [] Partially [] Not [] N/A []
1.3 (ComC 4.2.1.1)	Use established common response communication language (i.e., plain English) to ensure information dissemination is timely, clear, acknowledged, and understood by all receivers.	Time: Task Completed? Fully [] Partially [] Not [] N/A []
1.4 (ComC 3.5)	Initiate documentation process of required forms and follow-up notations. - Create logs of actions and messages sent and received - Forms, logs and reports are created in accordance with local requirements	Time: Task Completed? Fully [] Partially [] Not [] N/A []

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Activity 2: Provide Emergency Operations Center Communications Support

Activity Description: In response to notification of an incident, provide and receive interoperable voice, data, and video communications.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Completion
2.3 (ComC 4.2.1)	Communicate incident response information per agency protocols. - Accurate and clear information passed to dispatched response teams - Incident information relayed to pertinent incident management facilities (e.g. ICP, EOC/MACC, etc.) - Incident information logged and disseminated to communications staff, as appropriate	Time: Task Completed? Fully [] Partially [] Not [] N/A []
2.4 (ComC 4.2.1.1)	Use established common response communications language (i.e. plain English) to ensure information dissemination is timely, clear, acknowledged, and understood by all receivers. - Dissemination is timely, clear, acknowledged, and understood by all receivers	Time: Task Completed? Fully [] Partially [] Not [] N/A []
2.6 (ComC 4.2.3)	Report and document the incident by completing and submitting required forms, reports, documentation, and follow-up notations. - Create logs of actions and messages sent and received - Forms, logs and reports are created in accordance with local requirements	Time: Task Completed? Fully [] Partially [] Not [] N/A []

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Exercise Evaluation Guide Analysis Sheets

The purpose of this section is to provide a narrative of what was observed by the evaluator/evaluation team for inclusion within the draft After Action Report/Improvement Plan. This section includes a chronological summary of what occurred during the exercise for the observed activities. This section also requests the evaluator provide key observations (strengths or areas for improvement) to provide feedback to the exercise participants to support sharing of lessons learned and best practices as well as identification of corrective actions to improve overall preparedness.

Observations Summary

Write a general chronological narrative of responder actions based on your observations during the exercise. Provide an overview of what you witnessed and, specifically, discuss how this particular Capability was carried out during the exercise, referencing specific Tasks where applicable. The narrative provided will be used in developing the exercise After-Action Report (AAR)/Improvement Plan (IP).

[Insert text electronically or on separate pages]

Evaluator ObservationsRecord your key observations using the structure provided below. Please try to provide a minimum of three observations for each section. There is no maximum (three templates are provided for each section; reproduce these as necessary for additional observations). Use these sections to discuss strengths and any areas requiring improvement. Please provide as much detail as possible, including references to specific Activities and/or Tasks. Document your observations with reference to plans, procedures, exercise logs, and other resources. Describe and analyze what you observed and, if applicable, make specific recommendations. Please be thorough, clear, and comprehensive, as these sections will feed directly into the drafting of the After-Action Report (AAR). Complete electronically if possible, or on separate pages if necessary.

Strengths
1. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis: (Include a discussion of what happened. When? Where? How? Who was involved? Also describe the root cause of the observation, including contributing factors and what led to the strength. Finally, if applicable, describe the positive consequences of the actions observed.)

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2) References: (Include references to plans, policies, and procedures relevant to the observation)
3) Recommendation: (Even though you have identified this issue as a strength, please identify any recommendations you may have for enhancing performance further, or for how this strength may be institutionalized or shared with others.)
2. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
3. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
Areas for Improvement
1. Observation Title:
Related Activity:

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Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis: (Include a discussion of what happened. When? Where? How? Who was involved? Also describe the root cause of the observation, including contributing factors and what led to the strength. Finally, if applicable, describe the negative consequences of the actions observed.)
2) References: (Include references to plans, policies, and procedures relevant to the observation)
3) Recommendation: (Write a recommendation to address the root cause. Relate your recommendations to needed changes in plans, procedures, equipment, training, mutual aid support, management and leadership support.)
2. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
3. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:

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Communications to MSEL Links:

Event #	Start Time	Responsible Controller	Event	EEG	EEG Activities
3	10:45 AM	Senior Controller	Facility Activation Message	2 - Communications	1.2, 1.3, 1.4; 2.3, 2.4, 2.6
6	9:00 AM	Senior Controller	Facility Reporting Requirements	2 - Communications	1.2
7	9:30 AM	Senior Controller	Notification to Facilities for Reporting Requirements	2 - Communications	1.2
10	10:15 AM	Senior Controller	H-72 Hour Conference Call	2 - Communications	1.2

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EEG - Triage

Exercise Evaluation Guide: 2013 ESF 8 Exercise

Capability Description:

Triage and Pre-Hospital Treatment is the capability to appropriately dispatch emergency medical services (EMS) resources; to provide feasible, suitable, and medically acceptable pre-hospital triage and treatment of patients; to provide transport as well as medical care en-route to an appropriate receiving facility; and to track patients to a treatment facility.

Capability Outcome:

Emergency Medical Services (EMS) resources are effectively and appropriately dispatched and provide pre-hospital triage, treatment, transport, tracking of patients, and documentation of care appropriate for the incident, while maintaining the capabilities of the EMS system for continued operations.

Jurisdiction or Organization:	Name of Exercise: 2013 ESF 8 Exercise
Location: Baton Rouge, LA 70821	Date: 6/11/2013 - 6/12/2013
Evaluator:	Evaluator Contact Info:

Note to Exercise Evaluators: Only review those activities listed below to which you have been assigned.

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Activity 1: Direct Triage and Pre-Hospital Treatment Tactical Operations

Activity Description: In response to a notification for emergency medical assets, provide the overall management and coordination of the Triage and Pre-Hospital Treatment Response, through to demobilization.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task O	Completion
	Time to provide medical coordination of on-scene emergency medical services (EMS) system personnel and other health resources	TARGET IAW federal, state, or local policy; in absence of policy: report time plus one hour	ACTUAL
	Time to provide medical coordination of public health services, hospitals, and healthcare providers	TARGET IAW federal, state, or local policy; in absence of policy: report time plus one hour	ACTUAL
1.2 (Res.C1a 3.1)	Coordinate with on-scene Incident Command. - Obtain briefing from Incident Command (IC) or appropriate authority - Report limiting medical care, personnel, and/or equipment factors to IC - Maintain ongoing coordination with IC for medical personnel and equipment needs -	Time: Task Completed? Fully [] Partially [] Not [] N/A []	
1.3 (Res.C1a 3.2)	Ensure effective, reliable interoperable communications between providers, medical command, public health, and health care facilities. - Identify operational radio channels - Establish contact with other ESF liaisons as necessary - Ensure that on-scene communication procedures are established - Ensure that on-scene equipment checks are completed	Time: Task Completed? Fully [] Partially []	Not [] N/A []
	Time to establish primary communication with on-scene personnel and ESF liaison contacts	TARGET	ACTUAL

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		IAW federal, state, or local policy; in absence of policy: report time plus one hour	
1.4 (Res.C1a 3.3.2)	Assess need for additional medical resources/mutual aid. - Coordinate with IC on projected needs - Coordinate with EMS responders on status and capacity - Identify mutual aid (local jurisdictional and EMAC) capacity and availability - Continually re-assess on-scene medical needs	Time: Task Completed? Fully [] Partially []	Not [] N/A []
1.8 (Res.C1a 3.3.1)	Organize and distribute medical resources. - Assess availability of on-scene unit-level medical equipment - Collect non-committed essential medical supplies and equipment - Establish medical supply and equipment resource area(s - Develop a medical equipment inventory list(s) - Complete appropriate documentation	Time: Task Completed? Fully [] Partially []	Not [] N/A []
	Time to ensure sufficient and appropriate medical equipment and supplies are readily available to on-scene personnel	TARGET IAW federal, state, or local policy; in absence of policy: report time plus two hours	ACTUAL

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Activity	Activity 2: Activate Triage and Pre-Hospital Treatment			
Activity De	escription: In response to a notification, respond, mobilize, and arrive on-scene to begin emerg	ency medical operations.		
	erved (check those that were observed and provide comments) isks (*) denote Performance Measures and Performance Indicators associated with a task. Plea	ase record the observed indica	tor for each measure	
	Task /Observation Keys	Time of Observation/ Task	Completion	
2.1 (Res.C1a 4.1)	Dispatch and support medical care personnel. - Coordination between incident call taker(s) and dispatcher(s) - Alert initial resources - Coordinate communication requests for additional resources - Convey hazard information to on-scene medical responders - Complete communication equipment checks	Time: Task Completed? Fully [] Partially []	Not [] N/A []	
	Time for EMS responders to be notified and dispatched to the scene	TARGET IAW federal, state, or local policy; in absence of policy: within 5-10 minutes	ACTUAL	

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Activity 3:	Triage
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Activity Description: Once on-scene, provide initial and ongoing emergency medical triage of ill and injured patients that prioritizes their respective treatment and transport.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Completion
3.2 (Res.C1a 5.2)	Initiate a patient tracking system. - Use triage tags - Document status and location of patients - Request additional triage tags as needed - Communicate patient tracking information to Medical Branch/Group Command	Time: Task Completed? Fully [] Partially [] Not [] N/A []
	Time to initiate a patient tracking system	TARGET ACTUAL IAW federal, state, or local policy; in absence of policy: within 30 minutes

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Activity 5: Transport

Activity Description: Transport ill and injured patients via the most appropriate mode of transport available (e.g., ambulances, helicopters, etc.), provide ongoing medical assessment and treatment en route to the designated receiving facility, and upon arrival transfer medical care of the patient(s) to the receiving facility's staff.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Com	oletion
5.3 (Res.C1a 7.2)	Coordinate and transport patients to the appropriate treatment facility. - Coordinate with receiving hospitals - Identify hospital capabilities - Assess and use safe and clear transport unit routes for egress and ingress - Assign ambulance transport designations - Load patient(s) - Track and document patient(s) transport	Time: Task Completed? Fully [] Partially [] No	t[] N/A[]
	Time to initiate coordination of patient transportation with appropriate treatment facility	TARGET IAW federal, state, or local policy; in absence of policy: within 30 minutes	ACTUAL

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Exercise Evaluation Guide Analysis Sheets

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Observations Summary

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[Insert text electronically or on separate pages]

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Strengths
1. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No

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1) Analysis: (Include a discussion of what happened. When? Where? How? Who was involved? Also describe the root cause of the observation, including contributing factors and what led to the strength. Finally, if applicable, describe the positive consequences of the actions observed.)
2) References: (Include references to plans, policies, and procedures relevant to the observation)
3) Recommendation: (Even though you have identified this issue as a strength, please identify any recommendations you may have for enhancing performance further, or for how this strength may be institutionalized or shared with others.)
2. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
3. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
Areas for Improvement

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Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis: (Include a discussion of what happened. When? Where? How? Who was involved? Also describe the root cause of the observation, including contributing factors and what led to the strength. Finally, if applicable, describe the negative consequences of the actions observed.)
2) References: (Include references to plans, policies, and procedures relevant to the observation)
3) Recommendation: (Write a recommendation to address the root cause. Relate your recommendations to needed changes in plans, procedures, equipment, training, mutual aid support, management and leadership support.)
2. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
3. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:

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3) Recommendation:

Triage to MSEL Links:

Event #	Start Time	Responsible Controller	Event	EEG	EEG Activities
20	1:00 PM	Senior Controller	Mass Casualty incident begins in Region 6	3 - Triage	1.2, 1.3, 1.4, 1.8, 2.1, 3.2, 5.3

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EEG – Medical Surge

Exercise Evaluation Guide: 2013 ESF 8 Exercise

Capability Description:

Medical Surge is the capability to rapidly expand the capacity of the existing healthcare system (long-term care facilities, community health agencies, acute care facilities, alternate care facilities and public health departments) in order to provide triage and subsequent medical care. This includes providing definitive care to individuals at the appropriate clinical level of care, within sufficient time to achieve recovery and minimize medical complications. The capability applies to an event resulting in a number or type of patients that overwhelm the day-to-day acute-care medical capacity. Medical Surge is defined as the rapid expansion of the capacity of the existing healthcare system in response to an event that results in increased need of personnel (clinical and non-clinical), support functions (laboratories and radiological), physical space (beds, alternate care facilities) and logistical support (clinical and non-clinical equipment and supplies).

Capability Outcome:

Injured or ill from the event are rapidly and appropriately cared for. Continuity of care is maintained for non-incident related illness or injury.

Jurisdiction or Organization:	Name of Exercise: 2013 ESF 8 Exercise	
Location: Baton Rouge, LA 70821	Date: 6/11/2013 - 6/12/2013	
Evaluator:	Evaluator Contact Info:	

Note to Exercise Evaluators: Only review those activities listed below to which you have been assigned.

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Activity 2: Incident Management					
Activity Description: In response to notification of a mass casualty incident, activate the healthcare organization's Emergency Operations Plan.					
	Tasks Observed (check those that were observed and provide comments) Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure				
	Task /Observation Keys	Time of Observation/ Task Completion			
2.4 (n/a)	Provide emergency operations support to incident management. - Establish connectivity and coordinate requests for emergency operations support with multi-agency coordination centers (e.g., local Emergency Operations Center (EOC), State EOC, etc.)	Time: Task Completed? Fully [] Partially [] Not [] N/A []			

Activity 6: Receive, Evaluate, and Treat Surge Casualties Activity Description: Receive mass casualties and provide appropriate evaluation and medical treatment. **Tasks Observed** (check those that were observed and provide comments) Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure Task /Observation Keys Time of Observation/ Task Completion 6.3 Institute patient tracking. Time: - Implement systems to track all patients in the facility with capability to distinguish (n/a) between incident-related and non-incident patients Task Completed? Fully [] Partially [] Not [] N/A [] Percentage of patients tracked **TARGET** ACTUAL 100%

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Exercise Evaluation Guide Analysis Sheets

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Observations Summary

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[Insert text electronically or on separate pages]

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Strengths
1. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis: (Include a discussion of what happened. When? Where? How? Who was involved? Also describe the root cause of the observation, including contributing factors and what led to the strength. Finally, if applicable, describe the positive consequences of the actions observed.)
2) References: (Include references to plans, policies, and procedures relevant to the observation)

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performance further, or for how this strength may be institutionalized or shared with others.)
2. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
3. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
Areas for Improvement
1. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No

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including contributing factors and what led to the strength. Finally, if applicable, describe the negative consequences of the actions observed.)
2) References: (Include references to plans, policies, and procedures relevant to the observation)
3) Recommendation: (Write a recommendation to address the root cause. Relate your recommendations to needed changes in plans, procedures, equipment, training, mutual aid support, management and leadership support
2. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:
3. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:

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Medical Surge to MSEL Links:

Event #	Start Time	Responsible Controller	Event	EEG	EEG Activities
8	10:00 AM	Senior Controller	Nursing homes begin to upload patients to EMSTAT	4 - Medical Surge	6.3
12	11:00 AM	Senior Controller	Hospitals begin upload of patients to ARR	4 - Medical Surge	6.3
15	12:00 PM	AMP Controller/Evaluator	AMP activation in Regions 3 and 9	4 - Medical Surge	2.4, 6.3
19	1:00 PM	GOHSEP EOC Controller/Evaluator	Nursing homes report the start of evacuations	4 - Medical Surge	6.3
22	2:30 PM	GOHSEP EOC Controller/Evaluator	Hospitals complete patient uploads	4 - Medical Surge	6.3
24	3:00 PM	AMP Controller/Evaluator	DRCs review patient data in ARR	4 - Medical Surge	6.3
25	3:30 PM	GOHSEP EOC Controller/Evaluator	State ESF 8 reviews patient data in ARR	4 - Medical Surge	6.3
26	3:40 PM	GOHSEP EOC Controller/Evaluator	roller/Evaluator State ESF 8 produces Form 1s for evacuating hospitals	4 - Medical Surge	6.3
32	8:15 AM	Region 7 DRC requests support from LAVA for additional hospital staff		4 - Medical Surge	6.3
33	8:15 AM GOHSEP EOC Controller/Evaluator State ESF 8 submits PMRs and receives manifests from JPATS 4 - Medica		4 - Medical Surge	6.3	
34	8:15 AM	GOHSEP EOC Controller/Evaluator	State ESF 8 submits PMRs and receives manifests from TPMRC	4 - Medical Surge	6.3
37	10:00 AM	GOHSEP EOC Controller/Evaluator	Simulated Patient Movement	4 - Medical Surge	6.3
40	10:45 AM	GOHSEP EOC Controller/Evaluator	JPATS begins to report patient movement and location	4 - Medical Surge	6.3

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EEG – Mass Fatality Management

Exercise Evaluation Guide: 2013 ESF 8 Exercise

Capability Description:

Fatality Management is the capability to effectively perform scene documentation; the complete collection and recovery of the dead, victim's personal effects, and items of evidence; decontamination of remains and personal effects (if required); transportation, storage, documentation, and recovery of forensic and physical evidence; determination of the nature and extent of injury; identification of the fatalities using scientific means; certification of the cause and manner of death; processing and returning of human remains and personal effects of the victims to the legally authorized person(s) (if possible); and interaction with and provision of legal, customary, compassionate, and culturally competent required services to the families of deceased within the context of the family assistance center. All activities should be sufficiently documented for admissibility in criminal and/or civil courts. Fatality management activities also need to be incorporated in the surveillance and intelligence sharing networks, to identify sentinel cases of bioterrorism and other public health threats. Fatality management operations are conducted through a unified command structure.

Capability Outcome:

Complete documentation and recovery of human remains, personal effects, and items of evidence is done (except in cases where the health risk posed to personnel outweigh the benefits of recovery of remains and personal effects). Remains receive surface decontamination (if indicated) and, unless catastrophic circumstances dictate otherwise, are examined and identified, and released to the next of kin's funeral home with a complete certified death certificate. Reports of missing persons and ante-mortem data are efficiently collected. Victims' family members receive updated information prior to the media release. All hazardous material regulations are reviewed and any restriction on the transportation and disposition of remains are made clear by those with the authority and responsibility to establish the standards. All personal effects are made safe to return to legally authorized person(s) unless contraindicated by catastrophic circumstances. Law Enforcement agencies are given all the information needed to investigate and prosecute the case successfully. Families are provided incident specific support services.

Jurisdiction or Organization:	Name of Exercise: 2013 ESF 8 Exercise	
Location: Baton Rouge, LA 70821	Date: 6/11/2013 - 6/12/2013	
Evaluator:	Evaluator Contact Info:	
Note to Exercise Evaluators: Only review those activities listed below to which you have been assigned.		

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Activity 1: Direct Fatality Management

Activity Description: Direct all internal Fatality Management Operations, coordinating with other capabilities as needed.

Tasks Observed (check those that were observed and provide comments)

Note: Asterisks (*) denote Performance Measures and Performance Indicators associated with a task. Please record the observed indicator for each measure

	Task /Observation Keys	Time of Observation/ Task Completion		
	Allocate surge morgue resources	Yes [] No []		
1.2 (Res.C4a 3.4.3)	Coordinate State assistance for next-of-kin notification and collection of ante-mortem information. - Request appropriate personnel (i.e., psychologists, social services) - Contact State for use of facilities	Time: Task Completed? Fully [] Partially [] Not [] N/A []		
1.3 (Res.C4a 3.1.1)	Identify medico-legal authority Brief legal requirements/limitations - Number appropriate to incident as per Federal, State, local guidelines	Time: Task Completed? Fully [] Partially [] Not [] N/A []		
1.4 (Res.C4a 3.1.2)	Coordinate with medical facility/Department of Public Health/general medical community. - Victim expired under medical care - Physician provided needed medico-legal authority to issue death certificate	Time: Task Completed? Fully [] Partially [] Not [] N/A []		
1.6 (Res.C4a 3.4.1)	Identify ME/C staff for ante-mortem data collection in FAC. - Trained (skills and psychologically) - Multiple shifts	Time: Task Completed? Fully [] Partially [] Not [] N/A []		

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1.7 (Res.C4a 3.5.1)	Coordinate regional and State assistance for victim identification and mortuary services, and the processing, preparation, and disposition of remains. - Request State portable morgue - Available resources allocated by State authorities	Time: Task Completed? Fully [] Partially []	Not [] N/A []
	Time to locate suitable facilities for fatality management activities	TARGET Within 12-18 hours	ACTUAL

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Exercise Evaluation Guide Analysis Sheets

The purpose of this section is to provide a narrative of what was observed by the evaluator/evaluation team for inclusion within the draft After Action Report/Improvement Plan. This section includes a chronological summary of what occurred during the exercise for the observed activities. This section also requests the evaluator provide key observations (strengths or areas for improvement) to provide feedback to the exercise participants to support sharing of lessons learned and best practices as well as identification of corrective actions to improve overall preparedness.

Observations Summary

Write a general chronological narrative of responder actions based on your observations during the exercise. Provide an overview of what you witnessed and, specifically, discuss how this particular Capability was carried out during the exercise, referencing specific Tasks where applicable. The narrative provided will be used in developing the exercise After-Action Report (AAR)/Improvement Plan (IP).

[Insert text electronically or on separate pages]

Evaluator ObservationsRecord your key observations using the structure provided below. Please try to provide a minimum of three observations for each section. There is no maximum (three templates are provided for each section; reproduce these as necessary for additional observations). Use these sections to discuss strengths and any areas requiring improvement. Please provide as much detail as possible, including references to specific Activities and/or Tasks. Document your observations with reference to plans, procedures, exercise logs, and other resources. Describe and analyze what you observed and, if applicable, make specific recommendations. Please be thorough, clear, and comprehensive, as these sections will feed directly into the drafting of the After-Action Report (AAR). Complete electronically if possible, or on separate pages if necessary.

Strengths
1. Observation Title:
Related Activity:
Record for Lesson Learned? (Check the box that applies) Yes No

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including contributing factors and what led to the strength. Finally, if applicable, describe the positive consequences of the actions observed.)						
2) References: (Include references to plans, policies, and procedures relevant to the observation)						
3) Recommendation: (Even though you have identified this issue as a strength, please identify any recommendations you may have for enhancing performance further, or for how this strength may be institutionalized or shared with others.)						
2. Observation Title:						
Related Activity:						
Record for Lesson Learned? (Check the box that applies) Yes No						
1) Analysis:						
2) References:						
3) Recommendation:						
3. Observation Title:						
Related Activity:						
Record for Lesson Learned? (Check the box that applies) Yes No						
1) Analysis:						
2) References:						

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3) Recommendation:	
Areas for Improvement	
1. Observation Title:	
Related Activity:	
Record for Lesson Learned? (Check the box that applies) Yes No	
1) Analysis: (Include a discussion of what happened. When? Where? How? Who was involved? Also describe the root cause of the observation, including contributing factors and what led to the strength. Finally, if applicable, describe the negative consequences of the actions observed.)	
2) References: (Include references to plans, policies, and procedures relevant to the observation)	
3) Recommendation: (Write a recommendation to address the root cause. Relate your recommendations to needed changes in plans, procedures, equipment, training, mutual aid support, management and leadership support.	
2. Observation Title:	
Related Activity:	
Record for Lesson Learned? (Check the box that applies) Yes No	
1) Analysis:	
2) References:	
3) Recommendation:	
3. Observation Title:	
Related Activity:	

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Record for Lesson Learned? (Check the box that applies) Yes No
1) Analysis:
2) References:
3) Recommendation:

Fatality Management to MSEL Links:

Event #	Start Time	Responsible Controller	Event	EEG	EEG Activities
21	2:00 PM	Senior Controller	Mass Fatality group responds to 35 mass casualty deaths in Region 6	5 - Mass Fatality	All in Section 1

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